

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 1. Findings; purpose; text and revisory changes;  
5 validation; additional material.

6 (a) The Illinois Supreme Court, in *Lebron v. Gottlieb*  
7 *Memorial Hospital*, found that the limitations on noneconomic  
8 damages in medical malpractice actions that were created in  
9 Public Act 94-677, contained in Section 2-1706.5 of the Code of  
10 Civil Procedure, violate the separation of powers clause of the  
11 Illinois Constitution. Because Public Act 94-677 contained an  
12 inseverability provision, the Court held the Act to be void in  
13 its entirety. The Court emphasized, however, that "because the  
14 other provisions contained in Public Act 94-677 are deemed  
15 invalid solely on inseverability grounds, the legislature  
16 remains free to reenact any provisions it deems appropriate".

17 (b) It is the purpose of this Act to reenact certain  
18 provisions of Public Act 94-677 that did not involve  
19 limitations on noneconomic damages in medical malpractice  
20 actions, to validate certain actions taken in reliance on those  
21 provisions, and to make certain additional changes to the  
22 statutes.

23 (c) This Act reenacts Sections 7, 22, 23, 24, and 36 of the  
24 Medical Practice Act of 1987. This Act does not reenact any

1 other provisions of Public Act 94-677.

2 In this Act, the base text of the reenacted Sections  
3 includes the text as it existed at the time of the Supreme  
4 Court's decision, including any amendments that occurred after  
5 P.A. 94-677, and also includes amendments that occurred after  
6 the decision. Striking and underscoring is used only to show  
7 the changes being made by this Act to that base text.

8 (d) All otherwise lawful actions taken in reasonable  
9 reliance on or pursuant to the Sections reenacted by this Act,  
10 as set forth in Public Act 94-677 or subsequently amended, by  
11 any officer, employee, agency, or unit of State or local  
12 government or by any other person or entity, are hereby  
13 validated. The actions include, but are not limited to,  
14 disciplinary actions and adoption of administrative rules  
15 under the Illinois Administrative Procedure Act.

16 With respect to actions taken in relation to matters  
17 arising under the Sections reenacted by this Act, a person is  
18 rebuttably presumed to have acted in reasonable reliance on and  
19 pursuant to the provisions of Public Act 94-677, as those  
20 provisions had been amended at the time the action was taken.

21 With respect to their administration of matters arising  
22 under the Sections reenacted by this Act, officers, employees,  
23 agencies, and units of State and local government shall  
24 continue to apply the provisions of Public Act 94-677, as those  
25 provisions had been amended at the relevant time.

26 (e) This Act also contains material making new substantive

1 changes.

2 Section 5. The Regulatory Sunset Act is amended by changing  
3 Sections 4.21 and 4.22 as follows:

4 (5 ILCS 80/4.21)

5 Sec. 4.21. Act ~~Acts~~ repealed on January 1, 2011 ~~and~~  
6 ~~November 30, 2011.~~ (a) The following Act is ~~Acts are~~ repealed  
7 on January 1, 2011: The Fire Equipment Distributor and Employee  
8 Regulation Act of 2000. ~~(b) The following Act is repealed on~~  
9 ~~November 30, 2011: The Medical Practice Act of 1987.~~  
10 (Source: P.A. 96-1041, eff. 7-14-10; 96-1492, eff. 12-30-10.)

11 (5 ILCS 80/4.22)

12 Sec. 4.22. Act ~~Acts~~ repealed on December 31, 2012 ~~January~~  
13 ~~1, 2012.~~ The following Act is ~~Acts are~~ repealed on December 31,  
14 2012 ~~January 1, 2012:~~

15 The Medical Practice Act of 1987.

16 (Source: P.A. 97-24, eff. 6-28-11; 97-119, eff. 7-14-11;  
17 97-168, eff. 7-22-11; 97-226, eff. 7-28-11; 97-428, eff.  
18 8-16-11; 97-514, eff. 8-23-11; 97-598, eff. 8-26-11; 97-602,  
19 eff. 8-26-11; revised 8-30-11.)

20 Section 10. The Medical Practice Act of 1987 is amended by  
21 changing Sections 2, 3.5, 4, 7.5, 8, 8.1, 9, 9.7, 11, 14, 15,  
22 17, 18, 19, 20, 21, 25, 26, 33, 35, 37, 38, 40, 41, 42, 43, 44,

1 47, 54, 54.2, 59, and 61, by reenacting and changing Sections  
2 7, 22, and 23, and by reenacting Sections 24 and 36 as follows:

3 (225 ILCS 60/2) (from Ch. 111, par. 4400-2)

4 (Section scheduled to be repealed on November 30, 2011)

5 Sec. 2. Definitions. For purposes of this Act, the  
6 following definitions shall have the following meanings,  
7 except where the context requires otherwise:

8 ~~1.~~ "Act" means the Medical Practice Act of 1987.

9 "Address of record" means the designated address recorded  
10 by the Department in the applicant's or licensee's application  
11 file or license file as maintained by the Department's  
12 licensure maintenance unit. It is the duty of the applicant or  
13 licensee to inform the Department of any change of address and  
14 those changes must be made either through the Department's  
15 website or by contacting the Department.

16 ~~1.5.~~ "Chiropractic physician" means a person licensed to  
17 treat human ailments without the use of drugs and without  
18 operative surgery. Nothing in this Act shall be construed to  
19 prohibit a chiropractic physician from providing advice  
20 regarding the use of non-prescription products or from  
21 administering atmospheric oxygen. Nothing in this Act shall be  
22 construed to authorize a chiropractic physician to prescribe  
23 drugs.

24 ~~2.~~ "Department" means the Department of Financial and  
25 Professional Regulation.

1       ~~3.~~ "Director" means the Director of Professional  
2 Regulation.

3       ~~4.~~ "Disciplinary Action" means revocation, suspension,  
4 probation, supervision, practice modification, reprimand,  
5 required education, fines or any other action taken by the  
6 Department against a person holding a license.

7       ~~5.~~ "Disciplinary Board" means the Medical Disciplinary  
8 Board.

9       ~~6.~~ "Final Determination" means the governing body's final  
10 action taken under the procedure followed by a health care  
11 institution, or professional association or society, against  
12 any person licensed under the Act in accordance with the bylaws  
13 or rules and regulations of such health care institution, or  
14 professional association or society.

15       ~~7.~~ "Fund" means the Medical Disciplinary Fund.

16       ~~8.~~ "Impaired" means the inability to practice medicine with  
17 reasonable skill and safety due to physical or mental  
18 disabilities as evidenced by a written determination or written  
19 consent based on clinical evidence including deterioration  
20 through the aging process or loss of motor skill, or abuse of  
21 drugs or alcohol, of sufficient degree to diminish a person's  
22 ability to deliver competent patient care.

23       ~~9.~~ "Licensing Board" means the Medical Licensing Board.

24       ~~10.~~ "Physician" means a person licensed under the Medical  
25 Practice Act to practice medicine in all of its branches or a  
26 chiropractic physician.

1       ~~11.~~ "Professional Association" means an association or  
2 society of persons licensed under this Act, and operating  
3 within the State of Illinois, including but not limited to,  
4 medical societies, osteopathic organizations, and chiropractic  
5 organizations, but this term shall not be deemed to include  
6 hospital medical staffs.

7       ~~12.~~ "Program of Care, Counseling, or Treatment" means a  
8 written schedule of organized treatment, care, counseling,  
9 activities, or education, satisfactory to the Disciplinary  
10 Board, designed for the purpose of restoring an impaired person  
11 to a condition whereby the impaired person can practice  
12 medicine with reasonable skill and safety of a sufficient  
13 degree to deliver competent patient care.

14       "Secretary" means the Secretary of the Department of  
15 Financial and Professional Regulation.

16       (Source: P.A. 97-462, eff. 8-19-11.)

17       (225 ILCS 60/3.5)

18       (Section scheduled to be repealed on November 30, 2011)

19       Sec. 3.5. Unlicensed practice; violation; civil penalty.

20       (a) Any person who practices, offers to practice, attempts  
21 to practice, or holds oneself out to practice as a physician  
22 without being licensed under this Act shall, in addition to any  
23 other penalty provided by law, pay a civil penalty to the  
24 Department in an amount not to exceed \$10,000 ~~\$5,000~~ for each  
25 offense as determined by the Department. The civil penalty

1 shall be assessed by the Department after a hearing is held in  
2 accordance with the provisions set forth in this Act regarding  
3 the provision of a hearing for the discipline of a licensee.

4 (b) The Department has the authority and power to  
5 investigate any and all unlicensed activity.

6 (c) The civil penalty shall be paid within 60 days after  
7 the effective date of the order imposing the civil penalty. The  
8 order shall constitute a judgment and may be filed and  
9 execution had thereon in the same manner as any judgment from  
10 any court of record.

11 (Source: P.A. 89-474, eff. 6-18-96.)

12 (225 ILCS 60/4) (from Ch. 111, par. 4400-4)

13 (Section scheduled to be repealed on November 30, 2011)

14 Sec. 4. Exemptions. ~~(a)~~ This Act does not apply to the  
15 following:

16 (1) persons lawfully carrying on their particular  
17 profession or business under any valid existing regulatory  
18 Act of this State;

19 (2) persons rendering gratuitous services in cases of  
20 emergency; or

21 (3) persons treating human ailments by prayer or  
22 spiritual means as an exercise or enjoyment of religious  
23 freedom. ~~or~~

24 ~~(4) persons practicing the specified occupations set~~  
25 ~~forth in in subsection (a) of, and pursuant to a licensing~~

1 ~~exemption granted in subsection (b) or (d) of, Section~~  
2 ~~2105-350 of the Department of Professional Regulation Law~~  
3 ~~of the Civil Administrative Code of Illinois, but only for~~  
4 ~~so long as the 2016 Olympic and Paralympic Games~~  
5 ~~Professional Licensure Exemption Law is operable.~~

6 ~~(b) (Blank).~~

7 (Source: P.A. 96-7, eff. 4-3-09.)

8 (225 ILCS 60/7) (from Ch. 111, par. 4400-7)

9 (Section scheduled to be repealed on November 30, 2011)

10 (Text of Section WITH the changes made by P.A. 94-677,  
11 which has been held unconstitutional)

12 Sec. 7. Medical Disciplinary Board.

13 (A) There is hereby created the Illinois State Medical  
14 Disciplinary Board ~~(hereinafter referred to as the~~  
15 ~~"Disciplinary Board")~~. The Disciplinary Board shall consist of  
16 11 members, to be appointed by the Governor by and with the  
17 advice and consent of the Senate. All members shall be  
18 residents of the State, not more than 6 of whom shall be  
19 members of the same political party. All members shall be  
20 voting members. Five members shall be physicians licensed to  
21 practice medicine in all of its branches in Illinois possessing  
22 the degree of doctor of medicine, ~~and it shall be the goal that~~  
23 ~~at least one of the members practice in the field of~~  
24 ~~neurosurgery, one of the members practice in the field of~~  
25 ~~obstetrics and gynecology, and one of the members practice in~~

1 ~~the field of cardiology~~. One member shall be a physician  
2 licensed to practice medicine in all its branches in Illinois  
3 possessing the degree of doctor of osteopathy or osteopathic  
4 medicine. One member shall be a chiropractic physician licensed  
5 to practice in Illinois and possessing the degree of doctor of  
6 chiropractic. Four members shall be members of the public, who  
7 shall not be engaged in any way, directly or indirectly, as  
8 providers of health care.

9 (B) Members of the Disciplinary Board shall be appointed  
10 for terms of 4 years. Upon the expiration of the term of any  
11 member, their successor shall be appointed for a term of 4  
12 years by the Governor by and with the advice and consent of the  
13 Senate. The Governor shall fill any vacancy for the remainder  
14 of the unexpired term ~~by and~~ with the advice and consent of the  
15 Senate. Upon recommendation of the Board, any member of the  
16 Disciplinary Board may be removed by the Governor for  
17 misfeasance, malfeasance, or wilful neglect of duty, after  
18 notice, and a public hearing, unless such notice and hearing  
19 shall be expressly waived in writing. Each member shall serve  
20 on the Disciplinary Board until their successor is appointed  
21 and qualified. No member of the Disciplinary Board shall serve  
22 more than 2 consecutive 4 year terms.

23 In making appointments the Governor shall attempt to insure  
24 that the various social and geographic regions of the State of  
25 Illinois are properly represented.

26 In making the designation of persons to act for the several

1 professions represented on the Disciplinary Board, the  
2 Governor shall give due consideration to recommendations by  
3 members of the respective professions and by organizations  
4 therein.

5 (C) The Disciplinary Board shall annually elect one of its  
6 voting members as chairperson and one as vice chairperson. No  
7 officer shall be elected more than twice in succession to the  
8 same office. Each officer shall serve until their successor has  
9 been elected and qualified.

10 (D) (Blank).

11 (E) Six voting members of the Disciplinary Board, at least  
12 4 of whom are physicians, shall constitute a quorum. A vacancy  
13 in the membership of the Disciplinary Board shall not impair  
14 the right of a quorum to exercise all the rights and perform  
15 all the duties of the Disciplinary Board. Any action taken by  
16 the Disciplinary Board under this Act may be authorized by  
17 resolution at any regular or special meeting and each such  
18 resolution shall take effect immediately. The Disciplinary  
19 Board shall meet at least quarterly. The Disciplinary Board is  
20 empowered to adopt all rules and regulations necessary and  
21 incident to the powers granted to it under this Act.

22 (F) Each member, and member-officer, of the Disciplinary  
23 Board shall receive a per diem stipend as the Secretary ~~of the~~  
24 ~~Department, hereinafter referred to as the Secretary,~~ shall  
25 determine. ~~The Secretary shall also determine the per diem~~  
26 ~~stipend that each ex officio member shall receive.~~ Each member

1 shall be paid their necessary expenses while engaged in the  
2 performance of their duties.

3 (G) The Secretary shall select a Chief Medical Coordinator  
4 and not less than 2 Deputy Medical Coordinators who shall not  
5 be members of the Disciplinary Board. Each medical coordinator  
6 shall be a physician licensed to practice medicine in all of  
7 its branches, and the Secretary shall set their rates of  
8 compensation. The Secretary shall assign at least one medical  
9 coordinator to a region composed of Cook County and such other  
10 counties as the Secretary may deem appropriate, and such  
11 medical coordinator or coordinators shall locate their office  
12 in Chicago. The Secretary shall assign at least one medical  
13 coordinator to a region composed of the balance of counties in  
14 the State, and such medical coordinator or coordinators shall  
15 locate their office in Springfield. Each medical coordinator  
16 shall be the chief enforcement officer of this Act in his or  
17 her assigned region and shall serve at the will of the  
18 Disciplinary Board.

19 The Secretary shall employ, in conformity with the  
20 Personnel Code, investigators who are ~~not less than one full~~  
21 ~~time investigator for every 2,500 physicians licensed in the~~  
22 ~~State. Each investigator shall be a college graduates graduate~~  
23 with at least 2 years of ~~years'~~ investigative experience or one  
24 year of advanced medical education. Upon the written request of  
25 the Disciplinary Board, the Secretary shall employ, in  
26 conformity with the Personnel Code, such other professional,

1 technical, investigative, and clerical help, either on a full  
2 or part-time basis as the Disciplinary Board deems necessary  
3 for the proper performance of its duties.

4 (H) Upon the specific request of the Disciplinary Board,  
5 signed by either the chairperson ~~chairman~~, vice chairperson  
6 ~~chairman~~, or a medical coordinator of the Disciplinary Board,  
7 the Department of Human Services or the Department of State  
8 Police shall make available any and all information that they  
9 have in their possession regarding a particular case then under  
10 investigation by the Disciplinary Board.

11 (I) Members of the Disciplinary Board shall be immune from  
12 suit in any action based upon any disciplinary proceedings or  
13 other acts performed in good faith as members of the  
14 Disciplinary Board.

15 (J) The Disciplinary Board may compile and establish a  
16 statewide roster of physicians and other medical  
17 professionals, including the several medical specialties, of  
18 such physicians and medical professionals, who have agreed to  
19 serve from time to time as advisors to the medical  
20 coordinators. Such advisors shall assist the medical  
21 coordinators or the Disciplinary Board in their investigations  
22 and participation in complaints against physicians. Such  
23 advisors shall serve under contract and shall be reimbursed at  
24 a reasonable rate for the services provided, plus reasonable  
25 expenses incurred. While serving in this capacity, the advisor,  
26 for any act undertaken in good faith and in the conduct of his

1 or her ~~their~~ duties under this Section, shall be immune from  
2 civil suit.

3 (Source: P.A. 93-138, eff. 7-10-03; 94-677, eff. 8-25-05.)

4 (225 ILCS 60/7.5)

5 (Section scheduled to be repealed on November 30, 2011)

6 Sec. 7.5. Complaint Committee.

7 (a) There shall be a Complaint Committee of the  
8 Disciplinary Board composed of at least one of the medical  
9 coordinators established by subsection (G) ~~(g)~~ of Section 7 of  
10 this Act, the Chief of Medical Investigations (person employed  
11 by the Department who is in charge of investigating complaints  
12 against physicians and physician assistants), and at least 3  
13 voting members of the Disciplinary Board (at least 2 of whom  
14 shall be physicians) designated by the Chairperson ~~Chairman~~ of  
15 the ~~Medical~~ Disciplinary Board with the approval of the  
16 Disciplinary Board. The Disciplinary Board members so  
17 appointed shall serve one-year terms and may be eligible for  
18 reappointment for subsequent terms.

19 (b) The Complaint Committee shall meet at least twice a  
20 month to exercise its functions and duties set forth in  
21 subsection (c) below. At least 2 members of the Disciplinary  
22 Board shall be in attendance in order for any business to be  
23 transacted by the Complaint Committee. The Complaint Committee  
24 shall make every effort to consider expeditiously and take  
25 prompt action on each item on its agenda.

1 (c) The Complaint Committee shall have the following duties  
2 and functions:

3 (1) To recommend to the Disciplinary Board that a  
4 complaint file be closed.

5 (2) To refer a complaint file to the office of the  
6 Chief of Medical Prosecutions (person employed by the  
7 Department who is in charge of prosecuting formal  
8 complaints against licensees) for review.

9 (3) To make a decision in conjunction with the Chief of  
10 Medical Prosecutions regarding action to be taken on a  
11 complaint file.

12 (d) In determining what action to take or whether to  
13 proceed with prosecution of a complaint, the Complaint  
14 Committee shall consider, but not be limited to, the following  
15 factors: sufficiency of the evidence presented, prosecutorial  
16 merit under Section 22 of this Act, any recommendation made by  
17 the Department, and insufficient cooperation from complaining  
18 parties.

19 (Source: P.A. 93-214, eff. 1-1-04.)

20 (225 ILCS 60/8) (from Ch. 111, par. 4400-8)

21 (Section scheduled to be repealed on November 30, 2011)

22 Sec. 8. Medical Licensing Board.

23 (A) There is hereby created a Medical Licensing Board  
24 ~~(hereinafter referred to as the "Licensing Board")~~. The  
25 Licensing Board shall be composed of 7 members, to be appointed

1 by the Governor by and with the advice and consent of the  
2 Senate; 5 of whom shall be reputable physicians licensed to  
3 practice medicine in all of its branches in Illinois,  
4 possessing the degree of doctor of medicine; one member shall  
5 be a reputable physician licensed in Illinois to practice  
6 medicine in all of its branches, possessing the degree of  
7 doctor of osteopathy or osteopathic medicine; and one member  
8 shall be a reputable chiropractic physician licensed to  
9 practice in Illinois and possessing the degree of doctor of  
10 chiropractic. Of the 5 members holding the degree of doctor of  
11 medicine, one shall be a full-time or part-time teacher of  
12 professorial rank in the clinical department of an Illinois  
13 school of medicine.

14 (B) Members of the Licensing Board shall be appointed for  
15 terms of 4 years, and until their successors are appointed and  
16 qualified. Appointments to fill vacancies shall be made in the  
17 same manner as original appointments, for the unexpired portion  
18 of the vacated term. No more than 4 members of the Licensing  
19 Board shall be members of the same political party and all  
20 members shall be residents of this State. No member of the  
21 Licensing Board may be appointed to more than 2 successive 4  
22 year terms. ~~This limitation shall only apply to individuals~~  
23 ~~appointed to the Licensing Board after the effective date of~~  
24 ~~this Act.~~

25 (C) Members of the Licensing Board shall be immune from  
26 suit in any action based upon any licensing proceedings or

1 other acts performed in good faith as members of the Licensing  
2 Board.

3 (D) (Blank).

4 (E) The Licensing Board shall annually elect one of its  
5 members as chairperson and one as vice chairperson. No member  
6 shall be elected more than twice in succession to the same  
7 office. Each officer shall serve until his or her ~~their~~  
8 successor has been elected and qualified.

9 (F) None of the functions, powers or duties of the  
10 Department with respect to policies regarding licensure and  
11 examination under this Act, including the promulgation of such  
12 rules as may be necessary for the administration of this Act,  
13 shall be exercised by the Department except upon review of the  
14 Licensing Board.

15 (G) The Licensing Board shall receive the same compensation  
16 as the members of the ~~Medical~~ Disciplinary Board, which  
17 compensation shall be paid out of the Illinois State Medical  
18 Disciplinary Fund.

19 (Source: P.A. 89-702, eff. 7-1-97.)

20 (225 ILCS 60/8.1)

21 (Section scheduled to be repealed on November 30, 2011)

22 Sec. 8.1. Matters concerning advanced practice nurses. Any  
23 proposed rules, amendments, second notice materials and  
24 adopted rule or amendment materials, and policy statements  
25 concerning advanced practice nurses shall be presented to the

1 ~~Medical~~ Licensing Board for review and comment. The  
2 recommendations of both the Board of Nursing and the ~~Medical~~  
3 Licensing Board shall be presented to the Secretary for  
4 consideration in making final decisions. Whenever the Board of  
5 Nursing and the ~~Medical~~ Licensing Board disagree on a proposed  
6 rule or policy, the Secretary shall convene a joint meeting of  
7 the officers of each Board to discuss the resolution of any  
8 such disagreements.

9 (Source: P.A. 95-639, eff. 10-5-07.)

10 (225 ILCS 60/9) (from Ch. 111, par. 4400-9)

11 (Section scheduled to be repealed on November 30, 2011)

12 Sec. 9. Application for license. Each applicant for a  
13 license shall:

14 (A) Make application on blank forms prepared and  
15 furnished by the Department ~~of Professional Regulation~~  
16 ~~hereinafter referred to as the Department.~~

17 (B) Submit evidence satisfactory to the Department  
18 that the applicant:

19 (1) is of good moral character. In determining  
20 moral character under this Section, the Department may  
21 take into consideration whether the applicant has  
22 engaged in conduct or activities which would  
23 constitute grounds for discipline under this Act. The  
24 Department may also request the applicant to submit,  
25 and may consider as evidence of moral character,

1           endorsements from 2 or 3 individuals licensed under  
2           this Act;

3                   (2) has the preliminary and professional education  
4           required by this Act;

5                   (3) (blank); and

6                   (4) is physically, mentally, and professionally  
7           capable of practicing medicine with reasonable  
8           judgment, skill, and safety. In determining physical,  
9           mental and professional capacity under this Section,  
10          the ~~Medical~~ Licensing Board may, upon a showing of a  
11          possible incapacity or conduct or activities that  
12          would constitute grounds for discipline under this  
13          Act, compel any applicant to submit to a mental or  
14          physical examination and evaluation, or both, as  
15          provided for in Section 22 of this Act. The Licensing  
16          Board may condition or restrict any license, subject to  
17          the same terms and conditions as are provided for the  
18          ~~Medical~~ Disciplinary Board under Section 22 of this  
19          Act. Any such condition of a restricted license shall  
20          provide that the Chief Medical Coordinator or Deputy  
21          Medical Coordinator shall have the authority to review  
22          the subject physician's compliance with such  
23          conditions or restrictions, including, where  
24          appropriate, the physician's record of treatment and  
25          counseling regarding the impairment, to the extent  
26          permitted by applicable federal statutes and

1 regulations safeguarding the confidentiality of  
2 medical records of patients.

3 In determining professional capacity under this  
4 Section, an ~~any~~ individual ~~who has not been actively~~  
5 ~~engaged in the practice of medicine or as a medical,~~  
6 ~~osteopathic, or chiropractic student or who has not been~~  
7 ~~engaged in a formal program of medical education during the~~  
8 ~~2 years immediately preceding their application~~ may be  
9 required to complete such additional testing, training, or  
10 remedial education as the Licensing Board may deem  
11 necessary in order to establish the applicant's present  
12 capacity to practice medicine with reasonable judgment,  
13 skill, and safety. The Licensing Board may consider the  
14 following criteria, as they relate to an applicant, as part  
15 of its determination of professional capacity:

16 (1) Medical research in an established research  
17 facility, hospital, college or university, or private  
18 corporation.

19 (2) Specialized training or education.

20 (3) Publication of original work in learned,  
21 medical, or scientific journals.

22 (4) Participation in federal, State, local, or  
23 international public health programs or organizations.

24 (5) Professional service in a federal veterans or  
25 military institution.

26 (6) Any other professional activities deemed to

1           maintain and enhance the clinical capabilities of the  
2           applicant.

3           Any applicant applying for a license to practice  
4           medicine in all of its branches or for a license as a  
5           chiropractic physician who has not been engaged in the  
6           active practice of medicine or has not been enrolled in a  
7           medical program for 2 years prior to application must  
8           submit proof of professional capacity to the Licensing  
9           Board.

10           Any applicant applying for a temporary license that has  
11           not been engaged in the active practice of medicine or has  
12           not been enrolled in a medical program for longer than 5  
13           years prior to application must submit proof of  
14           professional capacity to the Licensing Board.

15           (C) Designate specifically the name, location, and  
16           kind of professional school, college, or institution of  
17           which the applicant is a graduate and the category under  
18           which the applicant seeks, and will undertake, to practice.

19           (D) Pay to the Department at the time of application  
20           the required fees.

21           (E) Pursuant to Department rules, as required, pass an  
22           examination authorized by the Department to determine the  
23           applicant's fitness to receive a license.

24           (F) Complete the application process within 3 years  
25           from the date of application. If the process has not been  
26           completed within 3 years, the application shall expire ~~be~~

1       ~~denied~~, application fees shall be forfeited, and the  
2       applicant must reapply and meet the requirements in effect  
3       at the time of reapplication.

4       (Source: P.A. 89-387, eff. 8-20-95; 89-702, eff. 7-1-97.)

5             (225 ILCS 60/9.7)

6             (Section scheduled to be repealed on November 30, 2011)

7       Sec. 9.7. Criminal history records background check. Each  
8       applicant for licensure or permit under Sections 9, 18, and 19  
9       shall have his or her fingerprints submitted to the Department  
10       of State Police in an electronic format that complies with the  
11       form and manner for requesting and furnishing criminal history  
12       record information as prescribed by the Department of State  
13       Police. These fingerprints shall be checked against the  
14       Department of State Police and Federal Bureau of Investigation  
15       criminal history record databases now and hereafter filed. The  
16       Department of State Police shall charge applicants a fee for  
17       conducting the criminal history records check, which shall be  
18       deposited into the State Police Services Fund and shall not  
19       exceed the actual cost of the records check. The Department of  
20       State Police shall furnish, pursuant to positive  
21       identification, records of Illinois convictions to the  
22       Department. The Department may require applicants to pay a  
23       separate fingerprinting fee, either to the Department or to a  
24       Department designated or approved vendor. The Department, in  
25       its discretion, may allow an applicant who does not have

1 reasonable access to a designated vendor to provide his or her  
2 fingerprints in an alternative manner. The Department may adopt  
3 any rules necessary to implement this Section.

4 ~~The Department shall require an applicant for a license under~~  
5 ~~Section 19 of this Act to undergo a criminal background check.~~

6 ~~The Department shall adopt rules to implement this Section.~~

7 (Source: P.A. 90-722, eff. 1-1-99.)

8 (225 ILCS 60/11) (from Ch. 111, par. 4400-11)

9 (Section scheduled to be repealed on November 30, 2011)

10 Sec. 11. Minimum education standards. The minimum  
11 standards of professional education to be enforced by the  
12 Department in conducting examinations and issuing licenses  
13 shall be as follows:

14 (A) Practice of medicine. For the practice of medicine  
15 in all of its branches:

16 (1) For applications for licensure under  
17 subsection (D) of Section 19 of this Act:

18 (a) that the applicant is a graduate of a  
19 medical or osteopathic college in the United  
20 States, its territories or Canada, that the  
21 applicant has completed a 2 year course of  
22 instruction in a college of liberal arts, or its  
23 equivalent, and a course of instruction in a  
24 medical or osteopathic college approved by the  
25 Department or by a private, not for profit

1           accrediting body approved by the Department, and  
2           in addition thereto, a course of postgraduate  
3           clinical training of not less than 12 months as  
4           approved by the Department; or

5           (b) that the applicant is a graduate of a  
6           medical or osteopathic college located outside the  
7           United States, its territories or Canada, and that  
8           the degree conferred is officially recognized by  
9           the country for the purposes of licensure, that the  
10          applicant has completed a 2 year course of  
11          instruction in a college of liberal arts or its  
12          equivalent, and a course of instruction in a  
13          medical or osteopathic college approved by the  
14          Department, which course shall have been not less  
15          than 132 weeks in duration and shall have been  
16          completed within a period of not less than 35  
17          months, and, in addition thereto, has completed a  
18          course of postgraduate clinical training of not  
19          less than 12 months, as approved by the Department,  
20          and has complied with any other standards  
21          established by rule.

22          For the purposes of this subparagraph (b) an  
23          applicant is considered to be a graduate of a  
24          medical college if the degree which is conferred is  
25          officially recognized by that country for the  
26          purposes of receiving a license to practice

1 medicine in all of its branches or a document is  
2 granted by the medical college which certifies the  
3 completion of all formal training requirements  
4 including any internship and social service; or

5 (c) that the applicant has studied medicine at  
6 a medical or osteopathic college located outside  
7 the United States, its territories, or Canada,  
8 that the applicant has completed a 2 year course of  
9 instruction in a college of liberal arts or its  
10 equivalent and all of the formal requirements of a  
11 foreign medical school except internship and  
12 social service, which course shall have been not  
13 less than 132 weeks in duration and shall have been  
14 completed within a period of not less than 35  
15 months; that the applicant has submitted an  
16 application to a medical college accredited by the  
17 Liaison Committee on Medical Education and  
18 submitted to such evaluation procedures, including  
19 use of nationally recognized medical student tests  
20 or tests devised by the individual medical  
21 college, and that the applicant has satisfactorily  
22 completed one academic year of supervised clinical  
23 training under the direction of such medical  
24 college; and, in addition thereto has completed a  
25 course of postgraduate clinical training of not  
26 less than 12 months, as approved by the Department,

1 and has complied with any other standards  
2 established by rule.

3 (d) Any clinical clerkships must have been  
4 completed in compliance with Section 10.3 of the  
5 Hospital Licensing Act, as amended.

6 (2) Effective January 1, 1988, for applications  
7 for licensure made subsequent to January 1, 1988, under  
8 Sections 9 or 17 of this Act by individuals not  
9 described in paragraph (3) of subsection (A) of Section  
10 11 who graduated after December 31, 1984:

11 (a) that the applicant: (i) graduated from a  
12 medical or osteopathic college officially  
13 recognized by the jurisdiction in which it is  
14 located for the purpose of receiving a license to  
15 practice medicine in all of its branches, and the  
16 applicant has completed, as defined by the  
17 Department, a 6 year postsecondary course of study  
18 comprising at least 2 academic years of study in  
19 the basic medical sciences; and 2 academic years of  
20 study in the clinical sciences, while enrolled in  
21 the medical college which conferred the degree,  
22 the core rotations of which must have been  
23 completed in clinical teaching facilities owned,  
24 operated or formally affiliated with the medical  
25 college which conferred the degree, or under  
26 contract in teaching facilities owned, operated or

1 affiliated with another medical college which is  
2 officially recognized by the jurisdiction in which  
3 the medical school which conferred the degree is  
4 located; or (ii) graduated from a medical or  
5 osteopathic college accredited by the Liaison  
6 Committee on Medical Education, the Committee on  
7 Accreditation of Canadian Medical Schools in  
8 conjunction with the Liaison Committee on Medical  
9 Education, or the Bureau of Professional Education  
10 of the American Osteopathic Association; and,  
11 (iii) in addition thereto, has completed 24 months  
12 ~~a course~~ of postgraduate clinical training ~~of not~~  
13 ~~less than 24 months~~, as approved by the Department;  
14 or

15 (b) that the applicant has studied medicine at  
16 a medical or osteopathic college located outside  
17 the United States, its territories, or Canada,  
18 that the applicant, in addition to satisfying the  
19 requirements of subparagraph (a), except for the  
20 awarding of a degree, has completed all of the  
21 formal requirements of a foreign medical school  
22 except internship and social service and has  
23 submitted an application to a medical college  
24 accredited by the Liaison Committee on Medical  
25 Education and submitted to such evaluation  
26 procedures, including use of nationally recognized

1 medical student tests or tests devised by the  
2 individual medical college, and that the applicant  
3 has satisfactorily completed one academic year of  
4 supervised clinical training under the direction  
5 of such medical college; and, in addition thereto,  
6 has completed 24 months ~~a course~~ of postgraduate  
7 clinical training ~~of not less than 24 months~~, as  
8 approved by the Department, and has complied with  
9 any other standards established by rule.

10 (3) (Blank).

11 (4) Any person granted a temporary license  
12 pursuant to Section 17 of this Act who shall  
13 satisfactorily complete a course of postgraduate  
14 clinical training and meet all of the requirements for  
15 licensure shall be granted a permanent license  
16 pursuant to Section 9.

17 (5) Notwithstanding any other provision of this  
18 Section an individual holding a temporary license  
19 under Section 17 of this Act shall be required to  
20 satisfy the undergraduate medical and post-graduate  
21 clinical training educational requirements in effect  
22 on the date of their application for a temporary  
23 license, provided they apply for a license under  
24 Section 9 of this Act and satisfy all other  
25 requirements of this Section while their temporary  
26 license is in effect.

1 (B) Treating human ailments without drugs and without  
2 operative surgery. For the practice of treating human  
3 ailments without the use of drugs and without operative  
4 surgery:

5 (1) For an applicant who was a resident student and  
6 who is a graduate after July 1, 1926, of a chiropractic  
7 college or institution, that such school, college or  
8 institution, at the time of the applicant's graduation  
9 required as a prerequisite to admission thereto a 4  
10 year course of instruction in a high school, and, as a  
11 prerequisite to graduation therefrom, a course of  
12 instruction in the treatment of human ailments, of not  
13 less than 132 weeks in duration and which shall have  
14 been completed within a period of not less than 35  
15 months except that as to students matriculating or  
16 entering upon a course of chiropractic study during the  
17 years 1940, 1941, 1942, 1943, 1944, 1945, 1946, and  
18 1947, such elapsed time shall be not less than 32  
19 months, such high school and such school, college or  
20 institution having been reputable and in good standing  
21 in the judgment of the Department.

22 (2) For an applicant who is a matriculant in a  
23 chiropractic college after September 1, 1969, that  
24 such applicant shall be required to complete a 2 year  
25 course of instruction in a liberal arts college or its  
26 equivalent and a course of instruction in a

1           chiropractic college in the treatment of human  
2           ailments, such course, as a prerequisite to graduation  
3           therefrom, having been not less than 132 weeks in  
4           duration and shall have been completed within a period  
5           of not less than 35 months, such college of liberal  
6           arts and chiropractic college having been reputable  
7           and in good standing in the judgment of the Department.

8           (3) For an applicant who is a graduate of a United  
9           States chiropractic college after August 19, 1981, the  
10          college of the applicant must be fully accredited by  
11          the Commission on Accreditation of the Council on  
12          Chiropractic Education or its successor at the time of  
13          graduation. Such graduates shall be considered to have  
14          met the minimum requirements which shall be in addition  
15          to those requirements set forth in the rules and  
16          regulations promulgated by the Department.

17          (4) For an applicant who is a graduate of a  
18          chiropractic college in another country; that such  
19          chiropractic college be equivalent to the standards of  
20          education as set forth for chiropractic colleges  
21          located in the United States.

22          (Source: P.A. 89-702, eff. 7-1-97; 90-818, eff. 3-23-99.)

23                 (225 ILCS 60/14) (from Ch. 111, par. 4400-14)

24                 (Section scheduled to be repealed on November 30, 2011)

25                 Sec. 14. Chiropractic students. Candidates for the degree

1 of doctor of chiropractic enrolled in a chiropractic college,  
2 accredited by the Council on Chiropractic Education, may  
3 practice under the direct, on-premises supervision of a  
4 chiropractic physician ~~who is licensed to treat human ailments~~  
5 ~~without the use of drugs and without operative surgery~~ and who  
6 is a member of the faculty of an accredited chiropractic  
7 college.

8 (Source: P.A. 89-702, eff. 7-1-97.)

9 (225 ILCS 60/15) (from Ch. 111, par. 4400-15)

10 (Section scheduled to be repealed on November 30, 2011)

11 Sec. 15. Chiropractic physician ~~Physician licensed to~~  
12 ~~practice without drugs and operative surgery;~~ license for  
13 general practice. Any chiropractic physician licensed under  
14 this Act ~~to treat human ailments without the use of~~  
15 ~~prescriptive drugs and operative surgery~~ shall be permitted to  
16 take the examination for licensure as a physician to practice  
17 medicine in all its branches and shall receive a license to  
18 practice medicine in all of its branches if he or she shall  
19 successfully pass such examination, upon proof of having  
20 successfully completed in a medical college, osteopathic  
21 college or chiropractic college reputable and in good standing  
22 in the judgment of the Department, courses of instruction in  
23 materia medica, therapeutics, surgery, obstetrics, and theory  
24 and practice deemed by the Department to be equal to the  
25 courses of instruction required in those subjects for admission

1 to the examination for a license to practice medicine in all of  
2 its branches, together with proof of having completed (a) the 2  
3 year course of instruction in a college of liberal arts, or its  
4 equivalent, required under this Act, and (b) a course of  
5 postgraduate clinical training of not less than 24 months as  
6 approved by the Department.

7 (Source: P.A. 89-702, eff. 7-1-97.)

8 (225 ILCS 60/17) (from Ch. 111, par. 4400-17)

9 (Section scheduled to be repealed on November 30, 2011)

10 Sec. 17. Temporary license. Persons holding the degree of  
11 Doctor of Medicine, persons holding the degree of Doctor of  
12 Osteopathy or Doctor of Osteopathic Medicine, and persons  
13 holding the degree of Doctor of Chiropractic or persons who  
14 have satisfied the requirements therefor and are eligible to  
15 receive such degree from a medical, osteopathic, or  
16 chiropractic school, who wish to pursue programs of graduate or  
17 specialty training in this State, may receive without  
18 examination, in the discretion of the Department, a 3-year  
19 temporary license. In order to receive a 3-year temporary  
20 license hereunder, an applicant shall submit evidence ~~furnish~~  
21 satisfactory ~~proof~~ to the Department that the applicant:

22 (A) Is of good moral character. In determining moral  
23 character under this Section, the Department may take into  
24 consideration whether the applicant has engaged in conduct  
25 or activities which would constitute grounds for

1 discipline under this Act. The Department may also request  
2 the applicant to submit, and may consider as evidence of  
3 moral character, endorsements from 2 or 3 individuals  
4 licensed under this Act;

5 (B) Has been accepted or appointed for specialty or  
6 residency training by a hospital situated in this State or  
7 a training program in hospitals or facilities maintained by  
8 the State of Illinois or affiliated training facilities  
9 which is approved by the Department for the purpose of such  
10 training under this Act. The applicant shall indicate the  
11 beginning and ending dates of the period for which the  
12 applicant has been accepted or appointed;

13 (C) Has or will satisfy the professional education  
14 requirements of Section 11 of this Act which are effective  
15 at the date of application except for postgraduate clinical  
16 training;

17 (D) Is physically, mentally, and professionally  
18 capable of practicing medicine or treating human ailments  
19 without the use of drugs and without ~~or~~ operative surgery  
20 with reasonable judgment, skill, and safety. In  
21 determining physical, mental and professional capacity  
22 under this Section, the ~~Medical~~ Licensing Board may, upon a  
23 showing of a possible incapacity, compel an applicant to  
24 submit to a mental or physical examination and evaluation,  
25 or both, and may condition or restrict any temporary  
26 license, subject to the same terms and conditions as are

1 provided for the ~~Medical~~ Disciplinary Board under Section  
2 22 of this Act. Any such condition of restricted temporary  
3 license shall provide that the Chief Medical Coordinator or  
4 Deputy Medical Coordinator shall have the authority to  
5 review the subject physician's compliance with such  
6 conditions or restrictions, including, where appropriate,  
7 the physician's record of treatment and counseling  
8 regarding the impairment, to the extent permitted by  
9 applicable federal statutes and regulations safeguarding  
10 the confidentiality of medical records of patients.

11 Three-year temporary licenses issued pursuant to this  
12 Section shall be valid only for the period of time designated  
13 therein, and may be extended or renewed pursuant to the rules  
14 of the Department, and if a temporary license is thereafter  
15 extended, it shall not extend beyond completion of the  
16 residency program. The holder of a valid 3-year temporary  
17 license shall be entitled thereby to perform only such acts as  
18 may be prescribed by and incidental to his or her ~~their~~ program  
19 of residency training; he or she ~~they~~ shall not be entitled to  
20 otherwise engage in the practice of medicine in this State  
21 unless fully licensed in this State.

22 A 3-year temporary license may be revoked by the Department  
23 upon proof that the holder thereof has engaged in the practice  
24 of medicine in this State outside of the program of his or her  
25 ~~their~~ residency or specialty training, or if the holder shall  
26 fail to supply the Department, within 10 days of its request,

1 with information as to his or her ~~their~~ current status and  
2 activities in his or her ~~their~~ specialty training program.

3 (Source: P.A. 89-702, eff. 7-1-97; 90-54, eff. 7-3-97.)

4 (225 ILCS 60/18) (from Ch. 111, par. 4400-18)

5 (Section scheduled to be repealed on November 30, 2011)

6 Sec. 18. Visiting professor, physician, or resident  
7 permits.

8 (A) Visiting professor permit.

9 (1) A visiting professor permit shall entitle a person  
10 to practice medicine in all of its branches or to practice  
11 the treatment of human ailments without the use of drugs  
12 and without operative surgery provided:

13 (a) the person maintains an equivalent  
14 authorization to practice medicine in all of its  
15 branches or to practice the treatment of human ailments  
16 without the use of drugs and without operative surgery  
17 in good standing in his or her ~~their~~ native licensing  
18 jurisdiction during the period of the visiting  
19 professor permit;

20 (b) the person has received a faculty appointment  
21 to teach in a medical, osteopathic or chiropractic  
22 school in Illinois; and

23 (c) the Department may prescribe the information  
24 necessary to establish an applicant's eligibility for  
25 a permit. This information shall include without

1           limitation (i) a statement from the dean of the medical  
2           school at which the applicant will be employed  
3           describing the applicant's qualifications and (ii) a  
4           statement from the dean of the medical school listing  
5           every affiliated institution in which the applicant  
6           will be providing instruction as part of the medical  
7           school's education program and justifying any clinical  
8           activities at each of the institutions listed by the  
9           dean.

10           (2) Application for visiting professor permits shall  
11           be made to the Department, in writing, on forms prescribed  
12           by the Department and shall be accompanied by the required  
13           fee established by rule, which shall not be refundable. Any  
14           application shall require the information as, in the  
15           judgment of the Department, will enable the Department to  
16           pass on the qualifications of the applicant.

17           (3) A visiting professor permit shall be valid for no  
18           longer than 2 years from the date of issuance or until the  
19           time the faculty appointment is terminated, whichever  
20           occurs first, and may be renewed only in accordance with  
21           subdivision (A) (6) of this Section.

22           (4) The applicant may be required to appear before the  
23           ~~Medical~~ Licensing Board for an interview prior to, and as a  
24           requirement for, the issuance of the original permit and  
25           the renewal.

26           (5) Persons holding a permit under this Section shall

1           only practice medicine in all of its branches or practice  
2           the treatment of human ailments without the use of drugs  
3           and without operative surgery in the State of Illinois in  
4           their official capacity under their contract within the  
5           medical school itself and any affiliated institution in  
6           which the permit holder is providing instruction as part of  
7           the medical school's educational program and for which the  
8           medical school has assumed direct responsibility.

9           (6) After the initial renewal of a visiting professor  
10          permit, a ~~A~~ visiting professor permit shall be valid until  
11          the last day of the next physician license renewal period,  
12          as set by rule, and may only be renewed for applicants who  
13          meet the following requirements:

14                 (i) have obtained the required continuing  
15                 education hours as set by rule; and

16                 (ii) have paid the fee prescribed for a license  
17                 under Section 21 of this Act.

18          For initial renewal, the visiting professor must  
19          successfully pass a general competency examination authorized  
20          by the Department by rule, unless he or she was issued an  
21          initial visiting professor permit on or after January 1, 2007,  
22          but prior to July 1, 2007.

23          (B) Visiting physician permit.

24                 (1) The Department may, in its discretion, issue a  
25                 temporary visiting physician permit, without examination,

1 provided:

2 (a) (blank);

3 (b) that the person maintains an equivalent  
4 authorization to practice medicine in all of its  
5 branches or to practice the treatment of human ailments  
6 without the use of drugs and without operative surgery  
7 in good standing in his or her native licensing  
8 jurisdiction during the period of the temporary  
9 visiting physician permit;

10 (c) that the person has received an invitation or  
11 appointment to study, demonstrate, or perform a  
12 specific medical, osteopathic, chiropractic or  
13 clinical subject or technique in a medical,  
14 osteopathic, or chiropractic school, a state or  
15 national medical, osteopathic, or chiropractic  
16 professional association or society conference or  
17 meeting, a hospital licensed under the Hospital  
18 Licensing Act, a hospital organized under the  
19 University of Illinois Hospital Act, or a facility  
20 operated pursuant to the Ambulatory Surgical Treatment  
21 Center Act; and

22 (d) that the temporary visiting physician permit  
23 shall only permit the holder to practice medicine in  
24 all of its branches or practice the treatment of human  
25 ailments without the use of drugs and without operative  
26 surgery within the scope of the medical, osteopathic,

1           chiropractic, or clinical studies, or in conjunction  
2           with the state or national medical, osteopathic, or  
3           chiropractic professional association or society  
4           conference or meeting, for which the holder was invited  
5           or appointed.

6           (2) The application for the temporary visiting  
7           physician permit shall be made to the Department, in  
8           writing, on forms prescribed by the Department, and shall  
9           be accompanied by the required fee established by rule,  
10          which shall not be refundable. The application shall  
11          require information that, in the judgment of the  
12          Department, will enable the Department to pass on the  
13          qualification of the applicant, and the necessity for the  
14          granting of a temporary visiting physician permit.

15          (3) A temporary visiting physician permit shall be  
16          valid for no longer than (i) 180 days from the date of  
17          issuance or (ii) until the time the medical, osteopathic,  
18          chiropractic, or clinical studies are completed, or the  
19          state or national medical, osteopathic, or chiropractic  
20          professional association or society conference or meeting  
21          has concluded, whichever occurs first.

22          (4) The applicant for a temporary visiting physician  
23          permit may be required to appear before the ~~Medical~~  
24          Licensing Board for an interview prior to, and as a  
25          requirement for, the issuance of a temporary visiting  
26          physician permit.

1           (5) A limited temporary visiting physician permit  
2 shall be issued to a physician licensed in another state  
3 who has been requested to perform emergency procedures in  
4 Illinois if he or she meets the requirements as established  
5 by rule.

6           (C) Visiting resident permit.

7           (1) The Department may, in its discretion, issue a  
8 temporary visiting resident permit, without examination,  
9 provided:

10           (a) (blank);

11           (b) that the person maintains an equivalent  
12 authorization to practice medicine in all of its  
13 branches or to practice the treatment of human ailments  
14 without the use of drugs and without operative surgery  
15 in good standing in his or her native licensing  
16 jurisdiction during the period of the temporary  
17 visiting resident permit;

18           (c) that the applicant is enrolled in a  
19 postgraduate clinical training program outside the  
20 State of Illinois that is approved by the Department;

21           (d) that the individual has been invited or  
22 appointed for a specific period of time to perform a  
23 portion of that post graduate clinical training  
24 program under the supervision of an Illinois licensed  
25 physician in an Illinois patient care clinic or

1 facility that is affiliated with the out-of-State post  
2 graduate training program; and

3 (e) that the temporary visiting resident permit  
4 shall only permit the holder to practice medicine in  
5 all of its branches or practice the treatment of human  
6 ailments without the use of drugs and without operative  
7 surgery within the scope of the medical, osteopathic,  
8 chiropractic or clinical studies for which the holder  
9 was invited or appointed.

10 (2) The application for the temporary visiting  
11 resident permit shall be made to the Department, in  
12 writing, on forms prescribed by the Department, and shall  
13 be accompanied by the required fee established by rule. The  
14 application shall require information that, in the  
15 judgment of the Department, will enable the Department to  
16 pass on the qualifications of the applicant.

17 (3) A temporary visiting resident permit shall be valid  
18 for 180 days from the date of issuance or until the time  
19 the medical, osteopathic, chiropractic, or clinical  
20 studies are completed, whichever occurs first.

21 (4) The applicant for a temporary visiting resident  
22 permit may be required to appear before the ~~Medical~~  
23 Licensing Board for an interview prior to, and as a  
24 requirement for, the issuance of a temporary visiting  
25 resident permit.

26 (Source: P.A. 95-915, eff. 8-26-08; 96-398, eff. 8-13-09.)

1 (225 ILCS 60/19) (from Ch. 111, par. 4400-19)

2 (Section scheduled to be repealed on November 30, 2011)

3 Sec. 19. Licensure by endorsement ~~without examination~~. The  
4 Department may, in its discretion, issue a license by  
5 endorsement ~~without examination~~ to any person who is currently  
6 licensed to practice medicine in all of its branches, or a  
7 chiropractic physician ~~to practice the treatment of human~~  
8 ~~ailments without the use of drugs or operative surgery~~, in any  
9 other state, territory, country or province, upon the following  
10 conditions and submitting evidence satisfactory to the  
11 Department of the following:

12 (A) (Blank);

13 (B) That the applicant is of good moral character. In  
14 determining moral character under this Section, the  
15 Department may take into consideration whether the  
16 applicant has engaged in conduct or activities which would  
17 constitute grounds for discipline under this Act. The  
18 Department may also request the applicant to submit, and  
19 may consider as evidence of moral character, endorsements  
20 from 2 or 3 individuals licensed under this Act;

21 (C) That the applicant is physically, mentally and  
22 professionally capable of practicing medicine with  
23 reasonable judgment, skill and safety. In determining  
24 physical, mental and professional capacity under this  
25 Section the ~~Medical~~ Licensing Board may, upon a showing of

1 a possible incapacity, compel an applicant to submit to a  
2 mental or physical examination and evaluation, or both, in  
3 the same manner as provided in Section 22 and may condition  
4 or restrict any license, subject to the same terms and  
5 conditions as are provided for the ~~Medical~~ Disciplinary  
6 Board under Section 22 of this Act. ~~The Medical Licensing~~  
7 ~~Board or the Department may order the examining physician~~  
8 ~~to present testimony concerning this mental or physical~~  
9 ~~examination of the applicant. No information shall be~~  
10 ~~excluded by reason of any common law or statutory privilege~~  
11 ~~relating to communications between the applicant and the~~  
12 ~~examining physician. Any condition of restricted license~~  
13 ~~shall provide that the Chief Medical Coordinator or Deputy~~  
14 ~~Medical Coordinator shall have the authority to review the~~  
15 ~~subject physician's compliance with such conditions or~~  
16 ~~restrictions, including, where appropriate, the~~  
17 ~~physician's record of treatment and counseling regarding~~  
18 ~~the impairment, to the extent permitted by applicable~~  
19 ~~federal statutes and regulations safeguarding the~~  
20 ~~confidentiality of medical records of patients.~~

21 (D) That if the applicant seeks to practice medicine in  
22 all of its branches:

23 (1) if the applicant was licensed in another  
24 jurisdiction prior to January 1, 1988, that the  
25 applicant has satisfied the educational requirements  
26 of paragraph (1) of subsection (A) or paragraph (2) of

1 subsection (A) of Section 11 of this Act; or

2 (2) if the applicant was licensed in another  
3 jurisdiction after December 31, 1987, that the  
4 applicant has satisfied the educational requirements  
5 of paragraph (A) (2) of Section 11 of this Act; and

6 (3) the requirements for a license to practice  
7 medicine in all of its branches in the particular  
8 state, territory, country or province in which the  
9 applicant is licensed are deemed by the Department to  
10 have been substantially equivalent to the requirements  
11 for a license to practice medicine in all of its  
12 branches in force in this State at the date of the  
13 applicant's license;

14 (E) That if the applicant seeks to treat human ailments  
15 without the use of drugs and without operative surgery:

16 (1) the applicant is a graduate of a chiropractic  
17 school or college approved by the Department at the  
18 time of their graduation;

19 (2) the requirements for the applicant's license  
20 to practice the treatment of human ailments without the  
21 use of drugs are deemed by the Department to have been  
22 substantially equivalent to the requirements for a  
23 license to practice in this State at the date of the  
24 applicant's license;

25 (F) That the Department may, in its discretion, issue a  
26 license by endorsement, ~~without examination~~, to any

1 graduate of a medical or osteopathic college, reputable and  
2 in good standing in the judgment of the Department, who has  
3 passed an examination for admission to the United States  
4 Public Health Service, or who has passed any other  
5 examination deemed by the Department to have been at least  
6 equal in all substantial respects to the examination  
7 required for admission to any such medical corps;

8 (G) That applications for licenses by endorsement  
9 ~~without examination~~ shall be filed with the Department,  
10 under oath, on forms prepared and furnished by the  
11 Department, and shall set forth, and applicants therefor  
12 shall supply such information respecting the life,  
13 education, professional practice, and moral character of  
14 applicants as the Department may require to be filed for  
15 its use;

16 (H) That the applicant undergo the criminal background  
17 check established under Section 9.7 of this Act.

18 In the exercise of its discretion under this Section, the  
19 Department is empowered to consider and evaluate each applicant  
20 on an individual basis. It may take into account, among other  
21 things, the extent to which there is or is not available to the  
22 Department, authentic and definitive information concerning  
23 the quality of medical education and clinical training which  
24 the applicant has had. Under no circumstances shall a license  
25 be issued under the provisions of this Section to any person  
26 who has previously taken and failed the written examination

1 conducted by the Department for such license. In the exercise  
2 of its discretion under this Section, the Department may  
3 require an applicant to successfully complete an examination as  
4 recommended by the Licensing Board. ~~In determining moral~~  
5 ~~character, the Department may take into consideration whether~~  
6 ~~the applicant has engaged in conduct or activities which would~~  
7 ~~constitute grounds for discipline under this Act.~~ The  
8 Department may also request the applicant to submit, and may  
9 consider as evidence of moral character, evidence from 2 or 3  
10 individuals licensed under this Act. Applicants have 3 years  
11 from the date of application to complete the application  
12 process. If the process has not been completed within 3 years,  
13 the application shall be denied, the fees shall be forfeited,  
14 and the applicant must reapply and meet the requirements in  
15 effect at the time of reapplication.

16 (Source: P.A. 89-702, eff. 7-1-97; 90-722, eff. 1-1-99.)

17 (225 ILCS 60/20) (from Ch. 111, par. 4400-20)

18 (Section scheduled to be repealed on November 30, 2011)

19 Sec. 20. Continuing education. The Department shall  
20 promulgate rules of continuing education for persons licensed  
21 under this Act that require an average of 50 ~~150~~ hours of  
22 continuing education per license year ~~renewal cycle~~. These  
23 rules shall be consistent with requirements of relevant  
24 professional associations, specialty ~~speciality~~ societies, or  
25 boards. The rules shall also address variances in part or in

1 whole for good cause, including, but not limited to, temporary  
2 illness or hardship. In establishing these rules, the  
3 Department shall consider educational requirements for medical  
4 staffs, requirements for specialty society board certification  
5 or for continuing education requirements as a condition of  
6 membership in societies representing the 2 categories of  
7 licensee under this Act. These rules shall assure that  
8 licensees are given the opportunity to participate in those  
9 programs sponsored by or through their professional  
10 associations or hospitals which are relevant to their practice.  
11 Each licensee is responsible for maintaining records of  
12 completion of continuing education and shall be prepared to  
13 produce the records when requested by the Department.

14 (Source: P.A. 92-750, eff. 1-1-03.)

15 (225 ILCS 60/21) (from Ch. 111, par. 4400-21)

16 (Section scheduled to be repealed on November 30, 2011)

17 Sec. 21. License renewal; restoration; inactive status;  
18 disposition and collection of fees.

19 (A) Renewal. The expiration date and renewal period for  
20 each license issued under this Act shall be set by rule. The  
21 holder of a license may renew the license by paying the  
22 required fee. The holder of a license may also renew the  
23 license within 90 days after its expiration by complying with  
24 the requirements for renewal and payment of an additional fee.  
25 A license renewal within 90 days after expiration shall be

1 effective retroactively to the expiration date.

2 The Department shall mail to each licensee under this Act,  
3 at his or her ~~last known~~ address of record, at least 60 days in  
4 advance of the expiration date of his or her license, a renewal  
5 notice ~~of that fact and an application for renewal form~~. No  
6 such license shall be deemed to have lapsed until 90 days after  
7 the expiration date and after such notice has ~~and application~~  
8 ~~have~~ been mailed by the Department as herein provided.

9 (B) Restoration. Any licensee who has permitted his or her  
10 license to lapse or who has had his or her license on inactive  
11 status may have his or her license restored by making  
12 application to the Department and filing proof acceptable to  
13 the Department of his or her fitness to have the license  
14 restored, including evidence certifying to active practice in  
15 another jurisdiction satisfactory to the Department, proof of  
16 meeting the continuing education requirements for one renewal  
17 period, and by paying the required restoration fee.

18 If the licensee has not maintained an active practice in  
19 another jurisdiction satisfactory to the Department, the  
20 Licensing Board shall determine, by an evaluation program  
21 established by rule, the applicant's fitness to resume active  
22 status and may require the licensee to complete a period of  
23 evaluated clinical experience and may require successful  
24 completion of a ~~the~~ practical examination specified by the  
25 Licensing Board.

26 However, any registrant whose license has expired while he

1 or she has been engaged (a) in Federal Service on active duty  
2 with the Army of the United States, the United States Navy, the  
3 Marine Corps, the Air Force, the Coast Guard, the Public Health  
4 Service or the State Militia called into the service or  
5 training of the United States of America, or (b) in training or  
6 education under the supervision of the United States  
7 preliminary to induction into the military service, may have  
8 his or her license reinstated or restored without paying any  
9 lapsed renewal fees, if within 2 years after honorable  
10 termination of such service, training, or education, he or she  
11 furnishes to the Department with satisfactory evidence to the  
12 effect that he or she has been so engaged and that his or her  
13 service, training, or education has been so terminated.

14 (C) Inactive licenses. Any licensee who notifies the  
15 Department, in writing on forms prescribed by the Department,  
16 may elect to place his or her license on an inactive status and  
17 shall, subject to rules of the Department, be excused from  
18 payment of renewal fees until he or she notifies the Department  
19 in writing of his or her desire to resume active status.

20 Any licensee requesting restoration from inactive status  
21 shall be required to pay the current renewal fee, provide proof  
22 of meeting the continuing education requirements for the period  
23 of time the license is inactive not to exceed one renewal  
24 period, and shall be required to restore his or her license as  
25 provided in subsection (B).

26 Any licensee whose license is in an inactive status shall

1 not practice in the State of Illinois.

2 (D) Disposition of monies collected. All monies collected  
3 under this Act by the Department shall be deposited in the  
4 Illinois State Medical Disciplinary Fund in the State Treasury,  
5 and used only for the following purposes: (a) by the ~~Medical~~  
6 Disciplinary Board and Licensing Board in the exercise of its  
7 powers and performance of its duties, as such use is made by  
8 the Department with full consideration of all recommendations  
9 of the ~~Medical~~ Disciplinary Board and Licensing Board, (b) for  
10 costs directly related to persons licensed under this Act, and  
11 (c) for direct and allocable indirect costs related to the  
12 public purposes of the Department ~~of Professional Regulation~~.

13 Moneys in the Fund may be transferred to the Professions  
14 Indirect Cost Fund as authorized under Section 2105-300 of the  
15 Department of Professional Regulation Law (20 ILCS  
16 2105/2105-300).

17 All earnings received from investment of monies in the  
18 Illinois State Medical Disciplinary Fund shall be deposited in  
19 the Illinois State Medical Disciplinary Fund and shall be used  
20 for the same purposes as fees deposited in such Fund.

21 (E) Fees. The following fees are nonrefundable.

22 (1) Applicants for any examination shall be required to  
23 pay, either to the Department or to the designated testing  
24 service, a fee covering the cost of determining the  
25 applicant's eligibility and providing the examination.  
26 Failure to appear for the examination on the scheduled

1 date, at the time and place specified, after the  
2 applicant's application for examination has been received  
3 and acknowledged by the Department or the designated  
4 testing service, shall result in the forfeiture of the  
5 examination fee.

6 (2) The fee for a license under Section 9 of this Act  
7 is \$300.

8 (3) The fee for a license under Section 19 of this Act  
9 is \$300.

10 (4) The fee for the renewal of a license for a resident  
11 of Illinois shall be calculated at the rate of \$100 per  
12 year, except for licensees who were issued a license within  
13 12 months of the expiration date of the license, the fee  
14 for the renewal shall be \$100. The fee for the renewal of a  
15 license for a nonresident shall be calculated at the rate  
16 of \$200 per year, except for licensees who were issued a  
17 license within 12 months of the expiration date of the  
18 license, the fee for the renewal shall be \$200.

19 (5) The fee for the restoration of a license other than  
20 from inactive status, is \$100. In addition, payment of all  
21 lapsed renewal fees not to exceed \$600 is required.

22 (6) The fee for a 3-year temporary license under  
23 Section 17 is \$100.

24 (7) The fee for the issuance of a duplicate license,  
25 for the issuance of a replacement license for a license  
26 which has been lost or destroyed, or for the issuance of a

1 license with a change of name or address other than during  
2 the renewal period is \$20. No fee is required for name and  
3 address changes on Department records when no duplicate  
4 license is issued.

5 (8) The fee to be paid for a license record for any  
6 purpose is \$20.

7 (9) The fee to be paid to have the scoring of an  
8 examination, administered by the Department, reviewed and  
9 verified, is \$20 plus any fees charged by the applicable  
10 testing service.

11 (10) The fee to be paid by a licensee for a wall  
12 certificate showing his or her license shall be the actual  
13 cost of producing the certificate as determined by the  
14 Department.

15 (11) The fee for a roster of persons licensed as  
16 physicians in this State shall be the actual cost of  
17 producing such a roster as determined by the Department.

18 (F) Any person who delivers a check or other payment to the  
19 Department that is returned to the Department unpaid by the  
20 financial institution upon which it is drawn shall pay to the  
21 Department, in addition to the amount already owed to the  
22 Department, a fine of \$50. The fines imposed by this Section  
23 are in addition to any other discipline provided under this Act  
24 for unlicensed practice or practice on a nonrenewed license.  
25 The Department shall notify the person that payment of fees and  
26 fines shall be paid to the Department by certified check or

1 money order within 30 calendar days of the notification. If,  
2 after the expiration of 30 days from the date of the  
3 notification, the person has failed to submit the necessary  
4 remittance, the Department shall automatically terminate the  
5 license or certificate or deny the application, without  
6 hearing. If, after termination or denial, the person seeks a  
7 license or certificate, he or she shall apply to the Department  
8 for restoration or issuance of the license or certificate and  
9 pay all fees and fines due to the Department. The Department  
10 may establish a fee for the processing of an application for  
11 restoration of a license or certificate to pay all expenses of  
12 processing this application. The Secretary ~~Director~~ may waive  
13 the fines due under this Section in individual cases where the  
14 Secretary ~~Director~~ finds that the fines would be unreasonable  
15 or unnecessarily burdensome.

16 (Source: P.A. 91-239, eff. 1-1-00; 91-357, eff. 7-29-99; 92-16,  
17 eff. 6-28-01; 92-146, eff. 1-1-02.)

18 (225 ILCS 60/22) (from Ch. 111, par. 4400-22)

19 (Section scheduled to be repealed on November 30, 2011)

20 (Text of Section WITH the changes made by P.A. 94-677,  
21 which has been held unconstitutional)

22 Sec. 22. Disciplinary action.

23 (A) The Department may revoke, suspend, place on probation  
24 ~~probationary status~~, reprimand, refuse to issue or renew, or  
25 take any other disciplinary or non-disciplinary action as the

1 Department may deem proper with regard to the license or  
2 ~~visiting professor~~ permit of any person issued under this Act  
3 to practice medicine, or a chiropractic physician, including  
4 imposing fines not to exceed \$10,000 for each violation, to  
5 ~~treat human ailments without the use of drugs and without~~  
6 ~~operative surgery~~ upon any of the following grounds:

7 (1) Performance of an elective abortion in any place,  
8 locale, facility, or institution other than:

9 (a) a facility licensed pursuant to the Ambulatory  
10 Surgical Treatment Center Act;

11 (b) an institution licensed under the Hospital  
12 Licensing Act;

13 (c) an ambulatory surgical treatment center or  
14 hospitalization or care facility maintained by the  
15 State or any agency thereof, where such department or  
16 agency has authority under law to establish and enforce  
17 standards for the ambulatory surgical treatment  
18 centers, hospitalization, or care facilities under its  
19 management and control;

20 (d) ambulatory surgical treatment centers,  
21 hospitalization or care facilities maintained by the  
22 Federal Government; or

23 (e) ambulatory surgical treatment centers,  
24 hospitalization or care facilities maintained by any  
25 university or college established under the laws of  
26 this State and supported principally by public funds

1 raised by taxation.

2 (2) Performance of an abortion procedure in a wilful  
3 and wanton manner on a woman who was not pregnant at the  
4 time the abortion procedure was performed.

5 (3) A plea of guilty or nolo contendere, finding of  
6 guilt, jury verdict, or entry of judgment or sentencing,  
7 including, but not limited to, convictions, preceding  
8 sentences of supervision, conditional discharge, or first  
9 offender probation, under the laws of any jurisdiction of  
10 the United States of any crime that is a felony. The  
11 conviction of a felony in this or any other jurisdiction,  
12 except as otherwise provided in subsection B of this  
13 Section, whether or not related to practice under this Act,  
14 or the entry of a guilty or nolo contendere plea to a  
15 felony charge.

16 (4) Gross negligence in practice under this Act.

17 (5) Engaging in dishonorable, unethical or  
18 unprofessional conduct of a character likely to deceive,  
19 defraud or harm the public.

20 (6) Obtaining any fee by fraud, deceit, or  
21 misrepresentation.

22 (7) Habitual or excessive use or abuse of drugs defined  
23 in law as controlled substances, of alcohol, or of any  
24 other substances which results in the inability to practice  
25 with reasonable judgment, skill or safety.

26 (8) Practicing under a false or, except as provided by

1 law, an assumed name.

2 (9) Fraud or misrepresentation in applying for, or  
3 procuring, a license under this Act or in connection with  
4 applying for renewal of a license under this Act.

5 (10) Making a false or misleading statement regarding  
6 their skill or the efficacy or value of the medicine,  
7 treatment, or remedy prescribed by them at their direction  
8 in the treatment of any disease or other condition of the  
9 body or mind.

10 (11) Allowing another person or organization to use  
11 their license, procured under this Act, to practice.

12 (12) Disciplinary action of another state or  
13 jurisdiction against a license or other authorization to  
14 practice as a medical doctor, doctor of osteopathy, doctor  
15 of osteopathic medicine or doctor of chiropractic, a  
16 certified copy of the record of the action taken by the  
17 other state or jurisdiction being prima facie evidence  
18 thereof.

19 (13) Violation of any provision of this Act or of the  
20 Medical Practice Act prior to the repeal of that Act, or  
21 violation of the rules, or a final administrative action of  
22 the Secretary, after consideration of the recommendation  
23 of the Disciplinary Board.

24 (14) Violation of the prohibition against fee  
25 splitting in Section 22.2 of this Act.

26 (15) A finding by the ~~Medical~~ Disciplinary Board that

1 the registrant after having his or her license placed on  
2 probationary status or subjected to conditions or  
3 restrictions violated the terms of the probation or failed  
4 to comply with such terms or conditions.

5 (16) Abandonment of a patient.

6 (17) Prescribing, selling, administering,  
7 distributing, giving or self-administering any drug  
8 classified as a controlled substance (designated product)  
9 or narcotic for other than medically accepted therapeutic  
10 purposes.

11 (18) Promotion of the sale of drugs, devices,  
12 appliances or goods provided for a patient in such manner  
13 as to exploit the patient for financial gain of the  
14 physician.

15 (19) Offering, undertaking or agreeing to cure or treat  
16 disease by a secret method, procedure, treatment or  
17 medicine, or the treating, operating or prescribing for any  
18 human condition by a method, means or procedure which the  
19 licensee refuses to divulge upon demand of the Department.

20 (20) Immoral conduct in the commission of any act  
21 including, but not limited to, commission of an act of  
22 sexual misconduct related to the licensee's practice.

23 (21) Wilfully making or filing false records or reports  
24 in his or her practice as a physician, including, but not  
25 limited to, false records to support claims against the  
26 medical assistance program of the Department of Healthcare

1 and Family Services (formerly Department of Public Aid)  
2 under the Illinois Public Aid Code.

3 (22) Wilful omission to file or record, or wilfully  
4 impeding the filing or recording, or inducing another  
5 person to omit to file or record, medical reports as  
6 required by law, or wilfully failing to report an instance  
7 of suspected abuse or neglect as required by law.

8 (23) Being named as a perpetrator in an indicated  
9 report by the Department of Children and Family Services  
10 under the Abused and Neglected Child Reporting Act, and  
11 upon proof by clear and convincing evidence that the  
12 licensee has caused a child to be an abused child or  
13 neglected child as defined in the Abused and Neglected  
14 Child Reporting Act.

15 (24) Solicitation of professional patronage by any  
16 corporation, agents or persons, or profiting from those  
17 representing themselves to be agents of the licensee.

18 (25) Gross and wilful and continued overcharging for  
19 professional services, including filing false statements  
20 for collection of fees for which services are not rendered,  
21 including, but not limited to, filing such false statements  
22 for collection of monies for services not rendered from the  
23 medical assistance program of the Department of Healthcare  
24 and Family Services (formerly Department of Public Aid)  
25 under the Illinois Public Aid Code.

26 (26) A pattern of practice or other behavior which

1 demonstrates incapacity or incompetence to practice under  
2 this Act.

3 (27) Mental illness or disability which results in the  
4 inability to practice under this Act with reasonable  
5 judgment, skill or safety.

6 (28) Physical illness, including, but not limited to,  
7 deterioration through the aging process, or loss of motor  
8 skill which results in a physician's inability to practice  
9 under this Act with reasonable judgment, skill or safety.

10 (29) Cheating on or attempt to subvert the licensing  
11 examinations administered under this Act.

12 (30) Wilfully or negligently violating the  
13 confidentiality between physician and patient except as  
14 required by law.

15 (31) The use of any false, fraudulent, or deceptive  
16 statement in any document connected with practice under  
17 this Act.

18 (32) Aiding and abetting an individual not licensed  
19 under this Act in the practice of a profession licensed  
20 under this Act.

21 (33) Violating state or federal laws or regulations  
22 relating to controlled substances, legend drugs, or  
23 ephedra~~r~~ as defined in the Ephedra Prohibition Act.

24 (34) Failure to report to the Department any adverse  
25 final action taken against them by another licensing  
26 jurisdiction (any other state or any territory of the

1 United States or any foreign state or country), by any peer  
2 review body, by any health care institution, by any  
3 professional society or association related to practice  
4 under this Act, by any governmental agency, by any law  
5 enforcement agency, or by any court for acts or conduct  
6 similar to acts or conduct which would constitute grounds  
7 for action as defined in this Section.

8 (35) Failure to report to the Department surrender of a  
9 license or authorization to practice as a medical doctor, a  
10 doctor of osteopathy, a doctor of osteopathic medicine, or  
11 doctor of chiropractic in another state or jurisdiction, or  
12 surrender of membership on any medical staff or in any  
13 medical or professional association or society, while  
14 under disciplinary investigation by any of those  
15 authorities or bodies, for acts or conduct similar to acts  
16 or conduct which would constitute grounds for action as  
17 defined in this Section.

18 (36) Failure to report to the Department any adverse  
19 judgment, settlement, or award arising from a liability  
20 claim related to acts or conduct similar to acts or conduct  
21 which would constitute grounds for action as defined in  
22 this Section.

23 (37) Failure to provide copies of medical records as  
24 required by law.

25 (38) Failure to furnish the Department, its  
26 investigators or representatives, relevant information,

1           legally requested by the Department after consultation  
2           with the Chief Medical Coordinator or the Deputy Medical  
3           Coordinator.

4           (39) Violating the Health Care Worker Self-Referral  
5           Act.

6           (40) Willful failure to provide notice when notice is  
7           required under the Parental Notice of Abortion Act of 1995.

8           (41) Failure to establish and maintain records of  
9           patient care and treatment as required by this law.

10          (42) Entering into an excessive number of written  
11          collaborative agreements with licensed advanced practice  
12          nurses resulting in an inability to adequately  
13          collaborate.

14          (43) Repeated failure to adequately collaborate with a  
15          licensed advanced practice nurse.

16          Except for actions involving the ground numbered (26), all  
17          proceedings to suspend, revoke, place on probationary status,  
18          or take any other disciplinary action as the Department may  
19          deem proper, with regard to a license on any of the foregoing  
20          grounds, must be commenced within 5 years next after receipt by  
21          the Department of a complaint alleging the commission of or  
22          notice of the conviction order for any of the acts described  
23          herein. Except for the grounds numbered (8), (9), (26), and  
24          (29), no action shall be commenced more than 10 years after the  
25          date of the incident or act alleged to have violated this  
26          Section. For actions involving the ground numbered (26), a

1 pattern of practice or other behavior includes all incidents  
2 alleged to be part of the pattern of practice or other behavior  
3 that occurred, or a report pursuant to Section 23 of this Act  
4 received, within the 10-year period preceding the filing of the  
5 complaint. In the event of the settlement of any claim or cause  
6 of action in favor of the claimant or the reduction to final  
7 judgment of any civil action in favor of the plaintiff, such  
8 claim, cause of action or civil action being grounded on the  
9 allegation that a person licensed under this Act was negligent  
10 in providing care, the Department shall have an additional  
11 period of 2 years from the date of notification to the  
12 Department under Section 23 of this Act of such settlement or  
13 final judgment in which to investigate and commence formal  
14 disciplinary proceedings under Section 36 of this Act, except  
15 as otherwise provided by law. The time during which the holder  
16 of the license was outside the State of Illinois shall not be  
17 included within any period of time limiting the commencement of  
18 disciplinary action by the Department.

19 The entry of an order or judgment by any circuit court  
20 establishing that any person holding a license under this Act  
21 is a person in need of mental treatment operates as a  
22 suspension of that license. That person may resume their  
23 practice only upon the entry of a Departmental order based upon  
24 a finding by the ~~Medical~~ Disciplinary Board that they have been  
25 determined to be recovered from mental illness by the court and  
26 upon the Disciplinary Board's recommendation that they be

1 permitted to resume their practice.

2 The Department may refuse to issue or take disciplinary  
3 action concerning the license of any person who fails to file a  
4 return, or to pay the tax, penalty or interest shown in a filed  
5 return, or to pay any final assessment of tax, penalty or  
6 interest, as required by any tax Act administered by the  
7 Illinois Department of Revenue, until such time as the  
8 requirements of any such tax Act are satisfied as determined by  
9 the Illinois Department of Revenue.

10 The Department, upon the recommendation of the  
11 Disciplinary Board, shall adopt rules which set forth standards  
12 to be used in determining:

13 (a) when a person will be deemed sufficiently  
14 rehabilitated to warrant the public trust;

15 (b) what constitutes dishonorable, unethical or  
16 unprofessional conduct of a character likely to deceive,  
17 defraud, or harm the public;

18 (c) what constitutes immoral conduct in the commission  
19 of any act, including, but not limited to, commission of an  
20 act of sexual misconduct related to the licensee's  
21 practice; and

22 (d) what constitutes gross negligence in the practice  
23 of medicine.

24 However, no such rule shall be admissible into evidence in  
25 any civil action except for review of a licensing or other  
26 disciplinary action under this Act.

1           In enforcing this Section, the ~~Medical~~ Disciplinary Board  
2 or the Licensing Board, upon a showing of a possible violation,  
3 may compel, in the case of the Disciplinary Board, any  
4 individual who is licensed to practice under this Act or holds  
5 a permit to practice under this Act, or, in the case of the  
6 Licensing Board, any individual who has applied for licensure  
7 or a permit pursuant to this Act, to submit to a mental or  
8 physical examination and evaluation, or both, which may include  
9 a substance abuse or sexual offender evaluation, as required by  
10 the Licensing Board or Disciplinary Board and at the expense of  
11 the Department. The Disciplinary Board or Licensing Board shall  
12 specifically designate the examining physician licensed to  
13 practice medicine in all of its branches or, if applicable, the  
14 multidisciplinary team involved in providing the mental or  
15 physical examination and evaluation, or both. The  
16 multidisciplinary team shall be led by a physician licensed to  
17 practice medicine in all of its branches and may consist of one  
18 or more or a combination of physicians licensed to practice  
19 medicine in all of its branches, licensed chiropractic  
20 physicians, licensed clinical psychologists, licensed clinical  
21 social workers, licensed clinical professional counselors, and  
22 other professional and administrative staff. Any examining  
23 physician or member of the multidisciplinary team may require  
24 any person ordered to submit to an examination and evaluation  
25 pursuant to this Section to submit to any additional  
26 supplemental testing deemed necessary to complete any

1 examination or evaluation process, including, but not limited  
2 to, blood testing, urinalysis, psychological testing, or  
3 neuropsychological testing. ~~The examining physician or~~  
4 physicians shall be those specifically designated by the  
5 Disciplinary Board. The ~~Medical~~ Disciplinary Board, the  
6 Licensing Board, or the Department may order the examining  
7 physician or any member of the multidisciplinary team to  
8 provide to the Department, the Disciplinary Board, or the  
9 Licensing Board any and all records, including business  
10 records, that relate to the examination and evaluation,  
11 including any supplemental testing performed. The Disciplinary  
12 Board, the Licensing Board, or the Department may order the  
13 examining physician or any member of the multidisciplinary team  
14 to present testimony concerning this ~~mental or physical~~  
15 examination and evaluation of the licensee, permit holder, or  
16 applicant, including testimony concerning any supplemental  
17 testing or documents relating to the examination and  
18 evaluation. No information, report, record, or other documents  
19 in any way related to the examination and evaluation shall be  
20 excluded by reason of any common law or statutory privilege  
21 relating to communication between the licensee or applicant and  
22 the examining physician or any member of the multidisciplinary  
23 team. No authorization is necessary from the licensee, permit  
24 holder, or applicant ordered to undergo an evaluation and  
25 examination for the examining physician or any member of the  
26 multidisciplinary team to provide information, reports,

1 records, or other documents or to provide any testimony  
2 regarding the examination and evaluation. The individual to be  
3 examined may have, at his or her own expense, another physician  
4 of his or her choice present during all aspects of the  
5 examination. Failure of any individual to submit to mental or  
6 physical examination and evaluation, or both, when directed,  
7 shall result in an automatic ~~be grounds for~~ suspension, without  
8 hearing, ~~of his or her license~~ until such time as the  
9 individual submits to the examination ~~if the Disciplinary Board~~  
10 ~~finds, after notice and hearing, that the refusal to submit to~~  
11 ~~the examination was without reasonable cause.~~ If the  
12 Disciplinary Board finds a physician unable to practice because  
13 of the reasons set forth in this Section, the Disciplinary  
14 Board shall require such physician to submit to care,  
15 counseling, or treatment by physicians approved or designated  
16 by the Disciplinary Board, as a condition for continued,  
17 reinstated, or renewed licensure to practice. Any physician,  
18 whose license was granted pursuant to Sections 9, 17, or 19 of  
19 this Act, or, continued, reinstated, renewed, disciplined or  
20 supervised, subject to such terms, conditions or restrictions  
21 who shall fail to comply with such terms, conditions or  
22 restrictions, or to complete a required program of care,  
23 counseling, or treatment, as determined by the Chief Medical  
24 Coordinator or Deputy Medical Coordinators, shall be referred  
25 to the Secretary for a determination as to whether the licensee  
26 shall have their license suspended immediately, pending a

1 hearing by the Disciplinary Board. In instances in which the  
2 Secretary immediately suspends a license under this Section, a  
3 hearing upon such person's license must be convened by the  
4 Disciplinary Board within 15 days after such suspension and  
5 completed without appreciable delay. The Disciplinary Board  
6 shall have the authority to review the subject physician's  
7 record of treatment and counseling regarding the impairment, to  
8 the extent permitted by applicable federal statutes and  
9 regulations safeguarding the confidentiality of medical  
10 records.

11 An individual licensed under this Act, affected under this  
12 Section, shall be afforded an opportunity to demonstrate to the  
13 Disciplinary Board that they can resume practice in compliance  
14 with acceptable and prevailing standards under the provisions  
15 of their license.

16 The Department may promulgate rules for the imposition of  
17 fines in disciplinary cases, not to exceed \$10,000 for each  
18 violation of this Act. Fines may be imposed in conjunction with  
19 other forms of disciplinary action, but shall not be the  
20 exclusive disposition of any disciplinary action arising out of  
21 conduct resulting in death or injury to a patient. Any funds  
22 collected from such fines shall be deposited in the Medical  
23 Disciplinary Fund.

24 (B) The Department shall revoke the license or ~~visiting~~  
25 permit ~~of any person~~ issued under this Act to practice medicine  
26 or a chiropractic physician ~~to treat human ailments without the~~

1 ~~use of drugs and without operative surgery,~~ who has been  
2 convicted a second time of committing any felony under the  
3 Illinois Controlled Substances Act or the Methamphetamine  
4 Control and Community Protection Act, or who has been convicted  
5 a second time of committing a Class 1 felony under Sections  
6 8A-3 and 8A-6 of the Illinois Public Aid Code. A person whose  
7 license or ~~visiting~~ permit is revoked under this subsection B  
8 ~~of Section 22 of this Act~~ shall be prohibited from practicing  
9 medicine or treating human ailments without the use of drugs  
10 and without operative surgery.

11 (C) The ~~Medical~~ Disciplinary Board shall recommend to the  
12 Department civil penalties and any other appropriate  
13 discipline in disciplinary cases when the Board finds that a  
14 physician willfully performed an abortion with actual  
15 knowledge that the person upon whom the abortion has been  
16 performed is a minor or an incompetent person without notice as  
17 required under the Parental Notice of Abortion Act of 1995.  
18 Upon the Board's recommendation, the Department shall impose,  
19 for the first violation, a civil penalty of \$1,000 and for a  
20 second or subsequent violation, a civil penalty of \$5,000.

21 (Source: P.A. 94-566, eff. 9-11-05; 94-677, eff. 8-25-05;  
22 95-331, eff. 8-21-07; 96-608, eff. 8-24-09; 96-1000, eff.  
23 7-2-10.)

24 (225 ILCS 60/23) (from Ch. 111, par. 4400-23)

25 (Section scheduled to be repealed on November 30, 2011)

1 (Text of Section WITH the changes made by P.A. 94-677,  
2 which has been held unconstitutional, and by P.A. 96-1372,  
3 which amended language added by P.A. 94-677)

4 Sec. 23. Reports relating to professional conduct and  
5 capacity.

6 (A) Entities required to report.

7 (1) Health care institutions. The chief administrator  
8 or executive officer of any health care institution  
9 licensed by the Illinois Department of Public Health shall  
10 report to the Disciplinary Board when any person's clinical  
11 privileges are terminated or are restricted based on a  
12 final determination made, in accordance with that  
13 institution's by-laws or rules and regulations, that a  
14 person has either committed an act or acts which may  
15 directly threaten patient care, ~~and not of an~~  
16 ~~administrative nature,~~ or that a person may be mentally or  
17 physically disabled in such a manner as to endanger  
18 patients under that person's care. Such officer also shall  
19 report if a person accepts voluntary termination or  
20 restriction of clinical privileges in lieu of formal action  
21 based upon conduct related directly to patient care ~~and not~~  
22 ~~of an administrative nature,~~ or in lieu of formal action  
23 seeking to determine whether a person may be mentally or  
24 physically disabled in such a manner as to endanger  
25 patients under that person's care. The ~~Medical~~  
26 Disciplinary Board shall, by rule, provide for the

1 reporting to it by health care institutions of all  
2 instances in which a person, licensed under this Act, who  
3 is impaired by reason of age, drug or alcohol abuse or  
4 physical or mental impairment, is under supervision and,  
5 where appropriate, is in a program of rehabilitation. Such  
6 reports shall be strictly confidential and may be reviewed  
7 and considered only by the members of the Disciplinary  
8 Board, or by authorized staff as provided by rules of the  
9 Disciplinary Board. Provisions shall be made for the  
10 periodic report of the status of any such person not less  
11 than twice annually in order that the Disciplinary Board  
12 shall have current information upon which to determine the  
13 status of any such person. Such initial and periodic  
14 reports of impaired physicians shall not be considered  
15 records within the meaning of The State Records Act and  
16 shall be disposed of, following a determination by the  
17 Disciplinary Board that such reports are no longer  
18 required, in a manner and at such time as the Disciplinary  
19 Board shall determine by rule. The filing of such reports  
20 shall be construed as the filing of a report for purposes  
21 of subsection (C) of this Section.

22 (2) Professional associations. The President or chief  
23 executive officer of any association or society, of persons  
24 licensed under this Act, operating within this State shall  
25 report to the Disciplinary Board when the association or  
26 society renders a final determination that a person has

1 committed unprofessional conduct related directly to  
2 patient care or that a person may be mentally or physically  
3 disabled in such a manner as to endanger patients under  
4 that person's care.

5 (3) Professional liability insurers. Every insurance  
6 company which offers policies of professional liability  
7 insurance to persons licensed under this Act, or any other  
8 entity which seeks to indemnify the professional liability  
9 of a person licensed under this Act, shall report to the  
10 Disciplinary Board the settlement of any claim or cause of  
11 action, or final judgment rendered in any cause of action,  
12 which alleged negligence in the furnishing of medical care  
13 by such licensed person when such settlement or final  
14 judgment is in favor of the plaintiff.

15 (4) State's Attorneys. The State's Attorney of each  
16 county shall report to the Disciplinary Board, within 5  
17 days, any ~~all~~ instances in which a person licensed under  
18 this Act is convicted ~~or otherwise found guilty of the~~  
19 ~~commission~~ of any felony or Class A misdemeanor. The  
20 State's Attorney of each county may report to the  
21 Disciplinary Board through a verified complaint any  
22 instance in which the State's Attorney believes that a  
23 physician has willfully violated the notice requirements  
24 of the Parental Notice of Abortion Act of 1995.

25 (5) State agencies. All agencies, boards, commissions,  
26 departments, or other instrumentalities of the government

1 of the State of Illinois shall report to the Disciplinary  
2 Board any instance arising in connection with the  
3 operations of such agency, including the administration of  
4 any law by such agency, in which a person licensed under  
5 this Act has either committed an act or acts which may be a  
6 violation of this Act or which may constitute  
7 unprofessional conduct related directly to patient care or  
8 which indicates that a person licensed under this Act may  
9 be mentally or physically disabled in such a manner as to  
10 endanger patients under that person's care.

11 (B) Mandatory reporting. All reports required by items  
12 (34), (35), and (36) of subsection (A) of Section 22 and by  
13 Section 23 shall be submitted to the Disciplinary Board in a  
14 timely fashion. Unless otherwise provided in this Section, the  
15 ~~The~~ reports shall be filed in writing within 60 days after a  
16 determination that a report is required under this Act. All  
17 reports shall contain the following information:

18 (1) The name, address and telephone number of the  
19 person making the report.

20 (2) The name, address and telephone number of the  
21 person who is the subject of the report.

22 (3) The name and date of birth of any patient or  
23 patients whose treatment is a subject of the report, if  
24 available, or other means of identification if such  
25 information is not available, identification of the  
26 hospital or other healthcare facility where the care at

1 issue in the report was rendered, provided, however, no  
2 medical records may be revealed.

3 (4) A brief description of the facts which gave rise to  
4 the issuance of the report, including the dates of any  
5 occurrences deemed to necessitate the filing of the report.

6 (5) If court action is involved, the identity of the  
7 court in which the action is filed, along with the docket  
8 number and date of filing of the action.

9 (6) Any further pertinent information which the  
10 reporting party deems to be an aid in the evaluation of the  
11 report.

12 The Disciplinary Board or Department may also exercise the  
13 power under Section 38 of this Act to subpoena copies of  
14 hospital or medical records in mandatory report cases alleging  
15 death or permanent bodily injury. Appropriate rules shall be  
16 adopted by the Department with the approval of the Disciplinary  
17 Board.

18 When the Department has received written reports  
19 concerning incidents required to be reported in items (34),  
20 (35), and (36) of subsection (A) of Section 22, the licensee's  
21 failure to report the incident to the Department under those  
22 items shall not be the sole grounds for disciplinary action.

23 Nothing contained in this Section shall act to in any way,  
24 waive or modify the confidentiality of medical reports and  
25 committee reports to the extent provided by law. Any  
26 information reported or disclosed shall be kept for the

1 confidential use of the Disciplinary Board, the Medical  
2 Coordinators, the Disciplinary Board's attorneys, the medical  
3 investigative staff, and authorized clerical staff, as  
4 provided in this Act, and shall be afforded the same status as  
5 is provided information concerning medical studies in Part 21  
6 of Article VIII of the Code of Civil Procedure, except that the  
7 Department may disclose information and documents to a federal,  
8 State, or local law enforcement agency pursuant to a subpoena  
9 in an ongoing criminal investigation or to a health care  
10 licensing body or medical licensing authority of this State or  
11 another state or jurisdiction pursuant to an official request  
12 made by that licensing body or medical licensing authority.  
13 Furthermore, information and documents disclosed to a federal,  
14 State, or local law enforcement agency may be used by that  
15 agency only for the investigation and prosecution of a criminal  
16 offense, or, in the case of disclosure to a health care  
17 licensing body or medical licensing authority, only for  
18 investigations and disciplinary action proceedings with regard  
19 to a license. Information and documents disclosed to the  
20 Department of Public Health may be used by that Department only  
21 for investigation and disciplinary action regarding the  
22 license of a health care institution licensed by the Department  
23 of Public Health.

24 (C) Immunity from prosecution. Any individual or  
25 organization acting in good faith, and not in a wilful and  
26 wanton manner, in complying with this Act by providing any

1 report or other information to the Disciplinary Board or a peer  
2 review committee, or assisting in the investigation or  
3 preparation of such information, or by voluntarily reporting to  
4 the Disciplinary Board or a peer review committee information  
5 regarding alleged errors or negligence by a person licensed  
6 under this Act, or by participating in proceedings of the  
7 Disciplinary Board or a peer review committee, or by serving as  
8 a member of the Disciplinary Board or a peer review committee,  
9 shall not, as a result of such actions, be subject to criminal  
10 prosecution or civil damages.

11 (D) Indemnification. Members of the Disciplinary Board,  
12 the Medical Coordinators, the Disciplinary Board's attorneys,  
13 the medical investigative staff, physicians retained under  
14 contract to assist and advise the medical coordinators in the  
15 investigation, and authorized clerical staff shall be  
16 indemnified by the State for any actions occurring within the  
17 scope of services on the Disciplinary Board, done in good faith  
18 and not wilful and wanton in nature. The Attorney General shall  
19 defend all such actions unless he or she determines either that  
20 there would be a conflict of interest in such representation or  
21 that the actions complained of were not in good faith or were  
22 wilful and wanton.

23 Should the Attorney General decline representation, the  
24 member shall have the right to employ counsel of his or her  
25 choice, whose fees shall be provided by the State, after  
26 approval by the Attorney General, unless there is a

1 determination by a court that the member's actions were not in  
2 good faith or were wilful and wanton.

3 The member must notify the Attorney General within 7 days  
4 of receipt of notice of the initiation of any action involving  
5 services of the Disciplinary Board. Failure to so notify the  
6 Attorney General shall constitute an absolute waiver of the  
7 right to a defense and indemnification.

8 The Attorney General shall determine within 7 days after  
9 receiving such notice, whether he or she will undertake to  
10 represent the member.

11 (E) Deliberations of Disciplinary Board. Upon the receipt  
12 of any report called for by this Act, other than those reports  
13 of impaired persons licensed under this Act required pursuant  
14 to the rules of the Disciplinary Board, the Disciplinary Board  
15 shall notify in writing, by certified mail, the person who is  
16 the subject of the report. Such notification shall be made  
17 within 30 days of receipt by the Disciplinary Board of the  
18 report.

19 The notification shall include a written notice setting  
20 forth the person's right to examine the report. Included in  
21 such notification shall be the address at which the file is  
22 maintained, the name of the custodian of the reports, and the  
23 telephone number at which the custodian may be reached. The  
24 person who is the subject of the report shall submit a written  
25 statement responding, clarifying, adding to, or proposing the  
26 amending of the report previously filed. The person who is the

1 subject of the report shall also submit with the written  
2 statement any medical records related to the report. The  
3 statement and accompanying medical records shall become a  
4 permanent part of the file and must be received by the  
5 Disciplinary Board no more than 30 days after the date on which  
6 the person was notified by the Disciplinary Board of the  
7 existence of the original report.

8 The Disciplinary Board shall review all reports received by  
9 it, together with any supporting information and responding  
10 statements submitted by persons who are the subject of reports.  
11 The review by the Disciplinary Board shall be in a timely  
12 manner but in no event, shall the Disciplinary Board's initial  
13 review of the material contained in each disciplinary file be  
14 less than 61 days nor more than 180 days after the receipt of  
15 the initial report by the Disciplinary Board.

16 When the Disciplinary Board makes its initial review of the  
17 materials contained within its disciplinary files, the  
18 Disciplinary Board shall, in writing, make a determination as  
19 to whether there are sufficient facts to warrant further  
20 investigation or action. Failure to make such determination  
21 within the time provided shall be deemed to be a determination  
22 that there are not sufficient facts to warrant further  
23 investigation or action.

24 Should the Disciplinary Board find that there are not  
25 sufficient facts to warrant further investigation, or action,  
26 the report shall be accepted for filing and the matter shall be

1 deemed closed and so reported to the Secretary. The Secretary  
2 shall then have 30 days to accept the ~~Medical~~ Disciplinary  
3 Board's decision or request further investigation. The  
4 Secretary shall inform the Board ~~in writing~~ of the decision to  
5 request further investigation, including the specific reasons  
6 for the decision. The individual or entity filing the original  
7 report or complaint and the person who is the subject of the  
8 report or complaint shall be notified in writing by the  
9 Secretary of any final action on their report or complaint. The  
10 Department shall disclose to the individual or entity who filed  
11 the original report or complaint, on request, the status of the  
12 Disciplinary Board's review of a specific report or complaint.  
13 Such request may be made at any time, including prior to the  
14 Disciplinary Board's determination as to whether there are  
15 sufficient facts to warrant further investigation or action.

16 (F) Summary reports. The Disciplinary Board shall prepare,  
17 on a timely basis, but in no event less than once every other  
18 month, a summary report of final disciplinary actions taken  
19 upon disciplinary files maintained by the Disciplinary Board.  
20 The summary reports shall be made available to the public upon  
21 request and payment of the fees set by the Department. This  
22 publication may be made available to the public on the  
23 Department's ~~Internet~~ website. Information or documentation  
24 relating to any disciplinary file that is closed without  
25 disciplinary action taken shall not be disclosed and shall be  
26 afforded the same status as is provided by Part 21 of Article

1 VIII of the Code of Civil Procedure.

2 (G) Any violation of this Section shall be a Class A  
3 misdemeanor.

4 (H) If any such person violates the provisions of this  
5 Section an action may be brought in the name of the People of  
6 the State of Illinois, through the Attorney General of the  
7 State of Illinois, for an order enjoining such violation or for  
8 an order enforcing compliance with this Section. Upon filing of  
9 a verified petition in such court, the court may issue a  
10 temporary restraining order without notice or bond and may  
11 preliminarily or permanently enjoin such violation, and if it  
12 is established that such person has violated or is violating  
13 the injunction, the court may punish the offender for contempt  
14 of court. Proceedings under this paragraph shall be in addition  
15 to, and not in lieu of, all other remedies and penalties  
16 provided for by this Section.

17 (Source: P.A. 96-1372, eff. 7-29-10; P.A. 97-449, eff. 1-1-12.)

18 (225 ILCS 60/24) (from Ch. 111, par. 4400-24)

19 (Section scheduled to be repealed on November 30, 2011)

20 (Text of Section WITH the changes made by P.A. 94-677,  
21 which has been held unconstitutional)

22 Sec. 24. Report of violations; medical associations. Any  
23 physician licensed under this Act, the Illinois State Medical  
24 Society, the Illinois Association of Osteopathic Physicians  
25 and Surgeons, the Illinois Chiropractic Society, the Illinois

1 Prairie State Chiropractic Association, or any component  
2 societies of any of these 4 groups, and any other person, may  
3 report to the Disciplinary Board any information the physician,  
4 association, society, or person may have that appears to show  
5 that a physician is or may be in violation of any of the  
6 provisions of Section 22 of this Act.

7 The Department may enter into agreements with the Illinois  
8 State Medical Society, the Illinois Association of Osteopathic  
9 Physicians and Surgeons, the Illinois Prairie State  
10 Chiropractic Association, or the Illinois Chiropractic Society  
11 to allow these organizations to assist the Disciplinary Board  
12 in the review of alleged violations of this Act. Subject to the  
13 approval of the Department, any organization party to such an  
14 agreement may subcontract with other individuals or  
15 organizations to assist in review.

16 Any physician, association, society, or person  
17 participating in good faith in the making of a report under  
18 this Act or participating in or assisting with an investigation  
19 or review under this Act shall have immunity from any civil,  
20 criminal, or other liability that might result by reason of  
21 those actions.

22 The medical information in the custody of an entity under  
23 contract with the Department participating in an investigation  
24 or review shall be privileged and confidential to the same  
25 extent as are information and reports under the provisions of  
26 Part 21 of Article VIII of the Code of Civil Procedure.

1           Upon request by the Department after a mandatory report has  
2 been filed with the Department, an attorney for any party  
3 seeking to recover damages for injuries or death by reason of  
4 medical, hospital, or other healing art malpractice shall  
5 provide patient records related to the physician involved in  
6 the disciplinary proceeding to the Department within 30 days of  
7 the Department's request for use by the Department in any  
8 disciplinary matter under this Act. An attorney who provides  
9 patient records to the Department in accordance with this  
10 requirement shall not be deemed to have violated any  
11 attorney-client privilege. Notwithstanding any other provision  
12 of law, consent by a patient shall not be required for the  
13 provision of patient records in accordance with this  
14 requirement.

15           For the purpose of any civil or criminal proceedings, the  
16 good faith of any physician, association, society or person  
17 shall be presumed. ~~The Disciplinary Board may request the~~  
18 ~~Illinois State Medical Society, the Illinois Association of~~  
19 ~~Osteopathic Physicians and Surgeons, the Illinois Prairie~~  
20 ~~State Chiropractic Association, or the Illinois Chiropractic~~  
21 ~~Society to assist the Disciplinary Board in preparing for or~~  
22 ~~conducting any medical competency examination as the Board may~~  
23 ~~deem appropriate.~~

24           (Source: P.A. 94-677, eff. 8-25-05.)

25           (225 ILCS 60/25) (from Ch. 111, par. 4400-25)

1 (Section scheduled to be repealed on November 30, 2011)

2 Sec. 25. The Secretary ~~Director~~ of the Department may, upon  
3 receipt of a written communication from the Secretary of Human  
4 Services, the Director of Healthcare and Family Services  
5 (formerly Director of Public Aid), or the Director of Public  
6 Health that continuation of practice of a person licensed under  
7 this Act constitutes an immediate danger to the public, and  
8 after consultation with the Chief Medical Coordinator or Deputy  
9 Medical Coordinator, immediately suspend the license of such  
10 person without a hearing. In instances in which the Secretary  
11 ~~Director~~ immediately suspends a license under this Section, a  
12 hearing upon such person's license must be convened by the  
13 Disciplinary Board within 15 days after such suspension and  
14 completed without appreciable delay. Such hearing is to be held  
15 to determine whether to recommend to the Secretary ~~Director~~  
16 that the person's license be revoked, suspended, placed on  
17 probationary status or reinstated, or whether such person  
18 should be subject to other disciplinary action. In the hearing,  
19 the written communication and any other evidence submitted  
20 therewith may be introduced as evidence against such person;  
21 provided however, the person, or their counsel, shall have the  
22 opportunity to discredit, impeach and submit evidence  
23 rebutting such evidence.

24 (Source: P.A. 95-331, eff. 8-21-07.)

25 (225 ILCS 60/26) (from Ch. 111, par. 4400-26)

1 (Section scheduled to be repealed on November 30, 2011)

2 Sec. 26. Advertising.

3 (1) Any person licensed under this Act may advertise the  
4 availability of professional services in the public media or on  
5 the premises where such professional services are rendered.  
6 Such advertising shall be limited to the following information:

7 (a) Publication of the person's name, title, office  
8 hours, address and telephone number;

9 (b) Information pertaining to the person's areas of  
10 specialization, including appropriate board certification  
11 or limitation of professional practice;

12 (c) Information on usual and customary fees for routine  
13 professional services offered, which information shall  
14 include, notification that fees may be adjusted due to  
15 complications or unforeseen circumstances;

16 (d) Announcement of the opening of, change of, absence  
17 from, or return to business;

18 (e) Announcement of additions to or deletions from  
19 professional licensed staff;

20 (f) The issuance of business or appointment cards.

21 (2) It is unlawful for any person licensed under this Act  
22 to use ~~testimonials or~~ claims of superior quality of care to  
23 entice the public. It shall be unlawful to advertise fee  
24 comparisons of available services with those of other persons  
25 licensed under this Act.

26 (3) This Act does not authorize the advertising of

1 professional services which the offeror of such services is not  
2 licensed to render. Nor shall the advertiser use statements  
3 which contain false, fraudulent, deceptive or misleading  
4 material or guarantees of success, statements which play upon  
5 the vanity or fears of the public, or statements which promote  
6 or produce unfair competition.

7 (4) A licensee shall include in every advertisement for  
8 services regulated under this Act his or her title as it  
9 appears on the license or the initials authorized under this  
10 Act.

11 (Source: P.A. 91-310, eff. 1-1-00.)

12 (225 ILCS 60/33) (from Ch. 111, par. 4400-33)

13 (Section scheduled to be repealed on November 30, 2011)

14 Sec. 33. Any person licensed under this Act to practice  
15 medicine in all of its branches shall be authorized to purchase  
16 legend drugs requiring an order of a person authorized to  
17 prescribe drugs, and to dispense such legend drugs in the  
18 regular course of practicing medicine. The dispensing of such  
19 legend drugs shall be the personal act of the person licensed  
20 under this Act and may not be delegated to any other person not  
21 licensed under this Act or the Pharmacy Practice Act unless  
22 such delegated dispensing functions are under the direct  
23 supervision of the physician authorized to dispense legend  
24 drugs. Except when dispensing manufacturers' samples or other  
25 legend drugs in a maximum 72 hour supply, persons licensed

1 under this Act shall maintain a book or file of prescriptions  
2 as required in the Pharmacy Practice Act. Any person licensed  
3 under this Act who dispenses any drug or medicine shall  
4 dispense such drug or medicine in good faith and shall affix to  
5 the box, bottle, vessel or package containing the same a label  
6 indicating (a) the date on which such drug or medicine is  
7 dispensed; (b) the name of the patient; (c) the last name of  
8 the person dispensing such drug or medicine; (d) the directions  
9 for use thereof; and (e) the proprietary name or names or, if  
10 there are none, the established name or names of the drug or  
11 medicine, the dosage and quantity, except as otherwise  
12 authorized by regulation of the Department ~~of Professional~~  
13 ~~Regulation~~. The foregoing labeling requirements shall not  
14 apply to drugs or medicines in a package which bears a label of  
15 the manufacturer containing information describing its  
16 contents which is in compliance with requirements of the  
17 Federal Food, Drug, and Cosmetic Act and the Illinois Food,  
18 Drug, and Cosmetic Act. "Drug" and "medicine" have the meaning  
19 ascribed to them in the Pharmacy Practice Act, as now or  
20 hereafter amended; "good faith" has the meaning ascribed to it  
21 in subsection (v) of Section 102 of the "Illinois Controlled  
22 Substances Act", approved August 16, 1971, as amended.

23 Prior to dispensing a prescription to a patient, the  
24 physician shall offer a written prescription to the patient  
25 which the patient may elect to have filled by the physician or  
26 any licensed pharmacy.

1 A violation of any provision of this Section shall  
2 constitute a violation of this Act and shall be grounds for  
3 disciplinary action provided for in this Act.

4 Nothing in this Section shall be construed to authorize a  
5 chiropractic physician to prescribe drugs.

6 (Source: P.A. 95-689, eff. 10-29-07.)

7 (225 ILCS 60/35) (from Ch. 111, par. 4400-35)

8 (Section scheduled to be repealed on November 30, 2011)

9 Sec. 35. The Secretary ~~Director~~ shall have the authority to  
10 appoint an attorney duly licensed to practice law in the State  
11 of Illinois to serve as the hearing officer in any action to  
12 suspend, revoke, place on probationary status, or take any  
13 other disciplinary action with regard to a license. The hearing  
14 officer shall have full authority to conduct the hearing. The  
15 hearing officer shall report his findings and recommendations  
16 to the Disciplinary Board within 30 days of the receipt of the  
17 record. The Disciplinary Board shall have 60 days from receipt  
18 of the report to review the report of the hearing officer and  
19 present their findings of fact, conclusions of law and  
20 recommendations to the Secretary ~~Director~~.

21 (Source: P.A. 85-4.)

22 (225 ILCS 60/36) (from Ch. 111, par. 4400-36)

23 (Section scheduled to be repealed on November 30, 2011)

24 (Text of Section WITH the changes made by P.A. 94-677,

1 which has been held unconstitutional, and by P.A. 96-1372,  
2 which amended language added by P.A. 94-677)

3 Sec. 36. Upon the motion of either the Department or the  
4 Disciplinary Board or upon the verified complaint in writing of  
5 any person setting forth facts which, if proven, would  
6 constitute grounds for suspension or revocation under Section  
7 22 of this Act, the Department shall investigate the actions of  
8 any person, so accused, who holds or represents that they hold  
9 a license. Such person is hereinafter called the accused.

10 The Department shall, before suspending, revoking, placing  
11 on probationary status, or taking any other disciplinary action  
12 as the Department may deem proper with regard to any license at  
13 least 30 days prior to the date set for the hearing, notify the  
14 accused in writing of any charges made and the time and place  
15 for a hearing of the charges before the Disciplinary Board,  
16 direct them to file their written answer thereto to the  
17 Disciplinary Board under oath within 20 days after the service  
18 on them of such notice and inform them that if they fail to  
19 file such answer default will be taken against them and their  
20 license may be suspended, revoked, placed on probationary  
21 status, or have other disciplinary action, including limiting  
22 the scope, nature or extent of their practice, as the  
23 Department may deem proper taken with regard thereto. The  
24 Department shall, at least 14 days prior to the date set for  
25 the hearing, notify in writing any person who filed a complaint  
26 against the accused of the time and place for the hearing of

1 the charges against the accused before the Disciplinary Board  
2 and inform such person whether he or she may provide testimony  
3 at the hearing.

4 Where a physician has been found, upon complaint and  
5 investigation of the Department, and after hearing, to have  
6 performed an abortion procedure in a wilful and wanton manner  
7 upon a woman who was not pregnant at the time such abortion  
8 procedure was performed, the Department shall automatically  
9 revoke the license of such physician to practice medicine in  
10 Illinois.

11 Such written notice and any notice in such proceedings  
12 thereafter may be served by delivery of the same, personally,  
13 to the accused person, or by mailing the same by registered or  
14 certified mail to the accused person's address of record ~~the~~  
15 ~~address last theretofore specified by the accused in their last~~  
16 ~~notification to the Department.~~

17 All information gathered by the Department during its  
18 investigation including information subpoenaed under Section  
19 23 or 38 of this Act and the investigative file shall be kept  
20 for the confidential use of the Secretary, Disciplinary Board,  
21 the Medical Coordinators, persons employed by contract to  
22 advise the Medical Coordinator or the Department, the  
23 Disciplinary Board's attorneys, the medical investigative  
24 staff, and authorized clerical staff, as provided in this Act  
25 and shall be afforded the same status as is provided  
26 information concerning medical studies in Part 21 of Article

1 VIII of the Code of Civil Procedure, except that the Department  
2 may disclose information and documents to a federal, State, or  
3 local law enforcement agency pursuant to a subpoena in an  
4 ongoing criminal investigation to a health care licensing body  
5 of this State or another state or jurisdiction pursuant to an  
6 official request made by that licensing body. Furthermore,  
7 information and documents disclosed to a federal, State, or  
8 local law enforcement agency may be used by that agency only  
9 for the investigation and prosecution of a criminal offense or,  
10 in the case of disclosure to a health care licensing body, only  
11 for investigations and disciplinary action proceedings with  
12 regard to a license issued by that licensing body.

13 (Source: P.A. 96-1372, eff. 7-29-10; P.A. 97-449, eff. 1-1-12.)

14 (225 ILCS 60/37) (from Ch. 111, par. 4400-37)

15 (Section scheduled to be repealed on November 30, 2011)

16 Sec. 37. At the time and place fixed in the notice, the  
17 Disciplinary Board provided for in this Act shall proceed to  
18 hear the charges, and ~~both~~ the accused person ~~and the~~  
19 ~~complainant~~ shall be accorded ample opportunity to present in  
20 person, or by counsel, such statements, testimony, evidence and  
21 argument as may be pertinent to the charges or to any defense  
22 thereto. The Disciplinary Board may continue such hearing from  
23 time to time. If the Disciplinary Board is not sitting at the  
24 time and place fixed in the notice or at the time and place to  
25 which the hearing has been continued, the Department shall

1 continue such hearing for a period not to exceed 30 days.

2 In case the accused person, after receiving notice, fails  
3 to file an answer, their license may, in the discretion of the  
4 Secretary ~~Director~~, having received first the recommendation  
5 of the Disciplinary Board, be suspended, revoked or placed on  
6 probationary status, or the Secretary ~~Director~~ may take  
7 whatever disciplinary action as he or she may deem proper,  
8 including limiting the scope, nature, or extent of said  
9 person's practice, without a hearing, if the act or acts  
10 charged constitute sufficient grounds for such action under  
11 this Act.

12 The Disciplinary Board has the authority to recommend to  
13 the Secretary ~~Director~~ that probation be granted or that other  
14 disciplinary or non-disciplinary action, including the  
15 limitation of the scope, nature or extent of a person's  
16 practice, be taken as it deems proper. If disciplinary or  
17 non-disciplinary action, other than suspension or revocation,  
18 is taken the Disciplinary Board may recommend that the  
19 Secretary ~~Director~~ impose reasonable limitations and  
20 requirements upon the accused registrant to insure compliance  
21 with the terms of the probation or other disciplinary action  
22 including, but not limited to, regular reporting by the accused  
23 to the Department of their actions, placing themselves under  
24 the care of a qualified physician for treatment, or limiting  
25 their practice in such manner as the Secretary ~~Director~~ may  
26 require.

1           The Secretary ~~Director~~, after consultation with the Chief  
2 Medical Coordinator or Deputy Medical Coordinator, may  
3 temporarily suspend the license of a physician without a  
4 hearing, simultaneously with the institution of proceedings  
5 for a hearing provided under this Section if the Secretary  
6 ~~Director~~ finds that evidence in his or her possession indicates  
7 that a physician's continuation in practice would constitute an  
8 immediate danger to the public. In the event that the Secretary  
9 ~~Director~~ suspends, temporarily, the license of a physician  
10 without a hearing, a hearing by the Disciplinary Board shall be  
11 held within 15 days after such suspension has occurred and  
12 shall be concluded without appreciable delay.

13       (Source: P.A. 85-4.)

14           (225 ILCS 60/38) (from Ch. 111, par. 4400-38)

15           (Section scheduled to be repealed on November 30, 2011)

16           Sec. 38. The Disciplinary Board or Department has power to  
17 subpoena and bring before it any person in this State and to  
18 take testimony either orally or by deposition, or both, with  
19 the same fees and mileage and in the same manner as is  
20 prescribed by law for judicial procedure in civil cases.

21           The Disciplinary Board, upon a determination that probable  
22 cause exists that a violation of one or more of the grounds for  
23 discipline listed in Section 22 has occurred or is occurring,  
24 may subpoena the medical and hospital records of individual  
25 patients of physicians licensed under this Act, provided, that

1 prior to the submission of such records to the Disciplinary  
2 Board, all information indicating the identity of the patient  
3 shall be removed and deleted. Notwithstanding the foregoing,  
4 the Disciplinary Board and Department shall possess the power  
5 to subpoena copies of hospital or medical records in mandatory  
6 report cases under Section 23 alleging death or permanent  
7 bodily injury when consent to obtain records is not provided by  
8 a patient or legal representative. Prior to submission of the  
9 records to the Disciplinary Board, all information indicating  
10 the identity of the patient shall be removed and deleted. All  
11 medical records and other information received pursuant to  
12 subpoena shall be confidential and shall be afforded the same  
13 status as is proved information concerning medical studies in  
14 Part 21 of Article VIII of the Code of Civil Procedure. The use  
15 of such records shall be restricted to members of the  
16 Disciplinary Board, the medical coordinators, and appropriate  
17 staff of the Department ~~of Professional Regulation~~ designated  
18 by the Disciplinary Board for the purpose of determining the  
19 existence of one or more grounds for discipline of the  
20 physician as provided for by Section 22 of this Act. Any such  
21 review of individual patients' records shall be conducted by  
22 the Disciplinary Board in strict confidentiality, provided  
23 that such patient records shall be admissible in a disciplinary  
24 hearing, before the Disciplinary Board, when necessary to  
25 substantiate the grounds for discipline alleged against the  
26 physician licensed under this Act, and provided further, that

1 nothing herein shall be deemed to supersede the provisions of  
2 Part 21 of Article VIII of the "Code of Civil Procedure", as  
3 now or hereafter amended, to the extent applicable.

4 The Secretary ~~Director~~, and any member of the Disciplinary  
5 Board each have power to administer oaths at any hearing which  
6 the Disciplinary Board or Department is authorized by law to  
7 conduct.

8 The Disciplinary Board, upon a determination that probable  
9 cause exists that a violation of one or more of the grounds for  
10 discipline listed in Section 22 has occurred or is occurring on  
11 the business premises of a physician licensed under this Act,  
12 may issue an order authorizing an appropriately qualified  
13 investigator employed by the Department to enter upon the  
14 business premises with due consideration for patient care of  
15 the subject of the investigation so as to inspect the physical  
16 premises and equipment and furnishings therein. No such order  
17 shall include the right of inspection of business, medical, or  
18 personnel records located on the premises. For purposes of this  
19 Section, "business premises" is defined as the office or  
20 offices where the physician conducts the practice of medicine.  
21 Any such order shall expire and become void five business days  
22 after its issuance by the Disciplinary Board. The execution of  
23 any such order shall be valid only during the normal business  
24 hours of the facility or office to be inspected.

25 (Source: P.A. 90-699, eff. 1-1-99.)

1 (225 ILCS 60/40) (from Ch. 111, par. 4400-40)

2 (Section scheduled to be repealed on November 30, 2011)

3 Sec. 40. The Disciplinary Board shall present to the  
4 Secretary ~~Director~~ a written report of its findings and  
5 recommendations. A copy of such report shall be served upon the  
6 accused person, either personally or by registered or certified  
7 mail. Within 20 days after such service, the accused person may  
8 present to the Department their motion, in writing, for a  
9 rehearing, which written motion shall specify the particular  
10 ground therefor. If the accused person orders and pays for a  
11 transcript of the record as provided in Section 39, the time  
12 elapsing thereafter and before such transcript is ready for  
13 delivery to them shall not be counted as part of such 20 days.

14 At the expiration of the time allowed for filing a motion  
15 for rehearing, the Secretary ~~Director~~ may take the action  
16 recommended by the Disciplinary Board. Upon the suspension,  
17 revocation, placement on probationary status, or the taking of  
18 any other disciplinary action, including the limiting of the  
19 scope, nature, or extent of one's practice, deemed proper by  
20 the Department, with regard to the license, certificate or  
21 visiting professor permit, the accused shall surrender their  
22 license to the Department, if ordered to do so by the  
23 Department, and upon their failure or refusal so to do, the  
24 Department may seize the same.

25 Each certificate of order of revocation, suspension, or  
26 other disciplinary action shall contain a brief, concise

1 statement of the ground or grounds upon which the Department's  
2 action is based, as well as the specific terms and conditions  
3 of such action. This document shall be retained as a permanent  
4 record by the Disciplinary Board and the Secretary ~~Director~~.

5 The Department shall at least annually publish a list of  
6 the names of all persons disciplined under this Act in the  
7 preceding 12 months. Such lists shall be available ~~mailed~~ by  
8 the Department on its website ~~to any person in the State upon~~  
9 ~~request~~.

10 In those instances where an order of revocation,  
11 suspension, or other disciplinary action has been rendered by  
12 virtue of a physician's physical illness, including, but not  
13 limited to, deterioration through the aging process, or loss of  
14 motor skill which results in a physician's inability to  
15 practice medicine with reasonable judgment, skill, or safety,  
16 the Department shall only permit this document, and the record  
17 of the hearing incident thereto, to be observed, inspected,  
18 viewed, or copied pursuant to court order.

19 (Source: P.A. 85-4.)

20 (225 ILCS 60/41) (from Ch. 111, par. 4400-41)

21 (Section scheduled to be repealed on November 30, 2011)

22 Sec. 41. Administrative review; certification of record.  
23 All final administrative decisions of the Department are  
24 subject to judicial review pursuant to the Administrative  
25 Review Law and its rules. The term "administrative decision" is

1 defined as in Section 3-101 of the Code of Civil Procedure.

2 Proceedings for judicial review shall be commenced in the  
3 circuit court of the county in which the party applying for  
4 review resides; but if the party is not a resident of this  
5 State, the venue shall be in Sangamon County.

6 The Department shall not be required to certify any record  
7 to the court, to ~~or~~ file an ~~any~~ answer in court, or to  
8 otherwise appear in any court in a judicial review proceeding, ~~7~~  
9 unless and until ~~there is filed in the court, with the~~  
10 ~~complaint, a receipt from~~ the Department has received from the  
11 plaintiff acknowledging payment of the costs of furnishing and  
12 certifying the record, which costs shall be determined by the  
13 Department ~~computed at the rate of 20 cents per page of the~~  
14 ~~record~~. Exhibits shall be certified without cost. Failure on  
15 the part of the plaintiff to file a receipt in court shall be  
16 grounds for dismissal of the action. During the pendency and  
17 hearing of any and all judicial proceedings incident to the  
18 disciplinary action the sanctions imposed upon the accused by  
19 the Department because of acts or omissions related to the  
20 delivery of direct patient care as specified in the  
21 Department's final administrative decision, shall as a matter  
22 of public policy remain in full force and effect in order to  
23 protect the public pending final resolution of any of the  
24 proceedings.

25 (Source: P.A. 87-1031; 88-184.)

1 (225 ILCS 60/42) (from Ch. 111, par. 4400-42)

2 (Section scheduled to be repealed on November 30, 2011)

3 Sec. 42. An order of revocation, suspension, placing the  
4 license on probationary status, or other formal disciplinary  
5 action as the Department may deem proper, or a certified copy  
6 thereof, over the seal of the Department and purporting to be  
7 signed by the Secretary ~~Director~~, is prima facie proof that:

8 (a) Such signature is the genuine signature of the  
9 Secretary ~~Director~~;

10 (b) The Secretary ~~Director~~ is duly appointed and qualified;  
11 and

12 (c) The Disciplinary Board and the members thereof are  
13 qualified.

14 Such proof may be rebutted.

15 (Source: P.A. 85-4.)

16 (225 ILCS 60/43) (from Ch. 111, par. 4400-43)

17 (Section scheduled to be repealed on November 30, 2011)

18 Sec. 43. Restoration of license from discipline. At any  
19 time after the successful completion of a term of probation,  
20 suspension, or revocation of a license, the Department may  
21 restore the license to the licensee, unless after an  
22 investigation and a hearing, the Secretary determines that  
23 restoration is not in the public interest. No person or entity  
24 whose license or permit has been revoked as authorized in this  
25 Act may apply for restoration of that license or permit until

1 such time as provided for in the Civil Administrative Code of  
2 Illinois. ~~At any time after the suspension, revocation, placing~~  
3 ~~on probationary status, or taking disciplinary action with~~  
4 ~~regard to any license, the Department may restore it to the~~  
5 ~~accused person, or take any other action to reinstate the~~  
6 ~~license to good standing, without examination, upon the written~~  
7 ~~recommendation of the Disciplinary Board.~~

8 (Source: P.A. 85-4.)

9 (225 ILCS 60/44) (from Ch. 111, par. 4400-44)

10 (Section scheduled to be repealed on November 30, 2011)

11 Sec. 44. None of the disciplinary functions, powers and  
12 duties enumerated in this Act shall be exercised by the  
13 Department except upon the action and report in writing of the  
14 Disciplinary Board.

15 In all instances, under this Act, in which the Disciplinary  
16 Board has rendered a recommendation to the Secretary ~~Director~~  
17 with respect to a particular physician, the Secretary ~~Director~~  
18 shall, in the event that he or she disagrees with or takes  
19 action contrary to the recommendation of the Disciplinary  
20 Board, file with the Disciplinary Board ~~and the Secretary of~~  
21 ~~State~~ his or her specific written reasons of disagreement with  
22 the Disciplinary Board. Such reasons shall be filed within 30  
23 days of the occurrence of the Secretary's ~~Director's~~ contrary  
24 position having been taken.

25 The action and report in writing of a majority of the

1 Disciplinary Board designated is sufficient authority upon  
2 which the Secretary ~~Director~~ may act.

3 Whenever the Secretary ~~Director~~ is satisfied that  
4 substantial justice has not been done either in an examination,  
5 or in a formal disciplinary action, or refusal to restore a  
6 license, he or she may order a reexamination or rehearing by  
7 the same or other examiners.

8 (Source: P.A. 85-4.)

9 (225 ILCS 60/47) (from Ch. 111, par. 4400-47)

10 (Section scheduled to be repealed on November 30, 2011)

11 Sec. 47. Administrative Procedure Act. The Illinois  
12 Administrative Procedure Act is hereby expressly adopted and  
13 incorporated herein as if all of the provisions of that Act  
14 were included in this Act, except that the provision of  
15 subsection (d) of Section 10-65 of the Illinois Administrative  
16 Procedure Act that provides that at hearings the licensee has  
17 the right to show compliance with all lawful requirements for  
18 retention, continuation or renewal of the license is  
19 specifically excluded. For the purposes of this Act the notice  
20 required under Section 10-25 of the Illinois Administrative  
21 Procedure Act is deemed sufficient when mailed to the ~~last~~  
22 ~~known~~ address of record of a party.

23 (Source: P.A. 88-45.)

24 (225 ILCS 60/54) (from Ch. 111, par. 4400-54)

1 (Section scheduled to be repealed on November 30, 2011)

2 Sec. 54. A person who holds himself or herself out to treat  
3 human ailments under a name other than his or her own, or by  
4 personation of any physician, shall be punished as provided in  
5 Section 59.

6 However, nothing in this Act shall be construed as  
7 prohibiting partnerships, limited liability companies,  
8 associations, or corporations in accordance with subsection  
9 (c) ~~item (14) of subsection (A)~~ of Section 22.2 ~~22~~ of this Act.  
10 (Source: P.A. 89-702, eff. 7-1-97.)

11 (225 ILCS 60/54.2)

12 (Section scheduled to be repealed on November 30, 2011)

13 Sec. 54.2. Physician delegation of authority.

14 (a) Nothing in this Act shall be construed to limit the  
15 delegation of patient care tasks or duties by a physician, to a  
16 licensed practical nurse, a registered professional nurse, or  
17 other licensed person practicing within the scope of his or her  
18 individual licensing Act. Delegation by a physician licensed to  
19 practice medicine in all its branches to physician assistants  
20 or advanced practice nurses is also addressed in Section 54.5  
21 of this Act. No physician may delegate any patient care task or  
22 duty that is statutorily or by rule mandated to be performed by  
23 a physician.

24 (b) In an office or practice setting and within a  
25 physician-patient relationship, a physician may delegate

1 patient care tasks or duties to an unlicensed person who  
2 possesses appropriate training and experience provided a  
3 health care professional, who is practicing within the scope of  
4 such licensed professional's individual licensing Act, is on  
5 site to provide assistance.

6 (c) Any such patient care task or duty delegated to a  
7 licensed or unlicensed person must be within the scope of  
8 practice, education, training, or experience of the delegating  
9 physician and within the context of a physician-patient  
10 relationship.

11 (d) Nothing in this Section shall be construed to affect  
12 referrals for professional services required by law.

13 (e) The Department shall have the authority to promulgate  
14 rules concerning a physician's delegation, including but not  
15 limited to, the use of light emitting devices for patient care  
16 or treatment.

17 (f) Nothing in this Act shall be construed to limit the  
18 method of delegation that may be authorized by any means,  
19 including, but not limited to, oral, written, electronic,  
20 standing orders, protocols, guidelines, or verbal orders.

21 (Source: P.A. 96-618, eff. 1-1-10.)

22 (225 ILCS 60/59) (from Ch. 111, par. 4400-59)

23 (Section scheduled to be repealed on November 30, 2011)

24 Sec. 59. Any person who violates for the first time Section  
25 49, 50, 51, 52, 53, 54, 55, or 56 of this Act is guilty of a

1 Class 4 felony. Any person who violates for the first time  
2 Section 27 of this Act is guilty of a Class A misdemeanor.

3 Any person who has been previously convicted under Section  
4 49, 50, 51, 52, 53, 54, 55, or 56 of this Act and who  
5 subsequently violates any of the Sections is guilty of a Class  
6 3 felony. Any person who has been previously convicted under  
7 Section 27 of this Act and who subsequently violates Section 27  
8 is guilty of a Class 4 felony. In addition, whenever any person  
9 is punished as a repeat offender under this Section, the  
10 Secretary ~~Director~~ of the Department shall proceed to obtain a  
11 permanent injunction against such person under Section 61 of  
12 this Act.

13 (Source: P.A. 85-4.)

14 (225 ILCS 60/61) (from Ch. 111, par. 4400-61)

15 (Section scheduled to be repealed on November 30, 2011)

16 Sec. 61. The practice of medicine in all of its branches or  
17 the treatment of human ailments without the use of drugs and  
18 without operative surgery by any person not at that time  
19 holding a valid and current license under this Act to do so is  
20 hereby declared to be inimical to the public welfare and to  
21 constitute a public nuisance. The Secretary ~~Director~~ of the  
22 Department, the Attorney General of the State of Illinois, the  
23 State's Attorney of any County in the State, or any resident  
24 citizen may maintain an action in the name of the people of the  
25 State of Illinois, may apply for an injunction in the circuit

1 court to enjoin any such person from engaging in such practice;  
2 and, upon the filing of a verified petition in such court, the  
3 court or any judge thereof, if satisfied by affidavit, or  
4 otherwise, that such person has been engaged in such practice  
5 without a valid and current license to do so, may issue a  
6 temporary restraining order or preliminary injunction without  
7 notice or bond, enjoining the defendant from any such further  
8 practice. A copy of the verified complaint shall be served upon  
9 the defendant and the proceedings shall thereafter be conducted  
10 as in other civil cases. If it be established that the  
11 defendant has been, or is engaged in any such unlawful  
12 practice, the court, or any judge thereof, may enter an order  
13 or judgment perpetually enjoining the defendant from further  
14 engaging in such practice. In all proceedings hereunder the  
15 court, in its discretion, may apportion the costs among the  
16 parties interested in the suit, including cost of filing  
17 complaint, service of process, witness fees and expenses, court  
18 reporter charges and reasonable attorneys fees. In case of  
19 violation of any injunction entered under the provisions of  
20 this Section, the court, or any judge thereof, may summarily  
21 try and punish the offender for contempt of court. Such  
22 injunction proceedings shall be in addition to, and not in lieu  
23 of, all penalties and other remedies in this Act provided.

24 (Source: P.A. 85-4.)

25 (225 ILCS 60/32 rep.)

1           Section 25. The Medical Practice Act of 1987 is amended by  
2           repealing Section 32.

3           Section 97. Severability. The provisions of this Act are  
4           severable under Section 1.31 of the Statute on Statutes.

5           Section 99. Effective date. This Act takes effect upon  
6           becoming law.